



KANSAS CORPORATION COMMISSION 1052708
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5056
Name: F. G. Holl Company L.L.C.
Address 1: 9431 E CENTRAL STE 100
Address 2: _____
City: WICHITA State: KS Zip: 67206 + 2563
Contact Person: Franklin R. Greenbaum
Phone: (316) 684-8481
CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: Bruce Becker
Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

<u>11/02/2010</u>	<u>11/13/2010</u>	<u>11/13/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-145-21619-00-00

Spot Description: 70' S. & 130' E. OF C SE NW

_____ SE NW Sec. 12 Twp. 22 S. R. 19 East West

2,050 Feet from North / South Line of Section

2,110 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Pawnee

Lease Name: FROETSCHNER TRUST 'B' Well #: 1-12

Field Name: Froetschner

Producing Formation: Not yet completed

Elevation: Ground: 2077 Kelly Bushing: 2085

Total Depth: 4650 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 1159 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 10400 ppm Fluid volume: 900 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Pauls Oilfield Service, Inc.

Lease Name: DIPMAN 2-34 SWD License #: 31085

Quarter SW Sec. 34 Twp. 21 S. R. 16 East West

County: Pawnee Permit #: D-03589

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

ALT I II III Approved by: _____ Date: 03/29/2011



1052708

Operator Name: F. G. Holl Company L.L.C. Lease Name: FROETSCHNER TRUST 'B' Well #: 1-12
 Sec. 12 Twp. 22 S. R. 19 East West County: Pawnee

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Attached	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Attached Attached Attached
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CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.25	8.6250	23	1159	A-Con & Common	525	2% gel, 3%CC
Production	7.8750	4.50	10.5	2491	60/40 Fox mix & AA-2	175	2% gel, 3% cc

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	-			
	-			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. _____		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	F. G. Holl Company L.L.C.
Well Name	FROETSCHNER TRUST 'B' 1-12
Doc ID	1052708

All Electric Logs Run

CDL
CNL
ML
DIL
BHCS
CPI

Form	ACO1 - Well Completion
Operator	F. G. Holl Company L.L.C.
Well Name	FROETSCHNER TRUST 'B' 1-12
Doc ID	1052708

Tops

Name	Top	Datum
Anhydrite	1183	+902
Herrington	2170	-85
Krider	2197	-112
Winfield	2227	-142
Towanda	2298	-213
Fort Riley	2350	-265
B/Florence	2422	-337
Wrefold	2484	-399
Neva	2699	-614
Red Eagle	2761	-676
Heebner	3632	-1547
Brown Lime	3719	-1634
Lansing	3726	-1641
BKC	4023	-1938
Cherokee Sh	4197	-2112
Cherokee Sand	4203	-2118
Mississippi Chert	4251	-2166
Viola	4427	-2342
Simpson Sand	4524	-2439
Simpson Shale	4549	-2464
Arbuckle	4576	-2491



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 02697 A

DATE _____ TICKET NO. _____

DATE OF JOB 11-13-10 DISTRICT KANSAS		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:							
CUSTOMER F.G. Holl Co. LLC.		LEASE Froetchner 'B' 1-12 WELL NO. 106							
ADDRESS		COUNTY Pawnee 12-22-19 STATE KANSAS							
CITY STATE		SERVICE CREW A. Worth, M. Mattal, M. McGro							
AUTHORIZED BY		JOB TYPE: 4 1/2" L.S.							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
28443 P.O. 9							11-13-10	106	
19903-19905 9						ARRIVED AT JOB	11-13-10	400	
19826-19860 9						START OPERATION	11-13-10	530	
						FINISH OPERATION	11-14-10	230	
						RELEASED	11-14-10	230	
						MILES FROM STATION TO WELL	75 M.		

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).
The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP105	AA2 cement	SK	125		
CP103	60/40 P02	SK	135		
CC102	cell FLAKE	lb	89		
CC105	Defoamer Powder	lb	30		
CC111	SALT Fine	lb	620		
CC115	Gas Blok	lb	118		
CC129	FIA-322	lb	118		
CC201	Gilsonite	lb	125		
CC200	Cement Gel	lb	234		
CF606	Latch down Plug & Baffle 4 1/2 Blue	EA	1		
CF1050	Cementing Shoe Type 4 1/2 Blue	EA	1		
CF1650	Turboliner 4 1/2 Blue	EA	6		
CF1900	4 1/2 Basket Blue	EA	1		
E101	Heavy Equip mileage	mi	150		
E113	Bulk Delivery Charge	TM	881		
E100	Unit mileage charge pickup	mi	75		
CE240	Blending + mixing Service Charge	SK	250		
S003	Service Supervisor first 8hrs on loc.	EA	1		
CE203	Depth Charge 2001-3000'	H-hrs	1		
CE504	Plug container utilization chg:	EA	1		

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$
MATERIALS	%TAX ON \$

TOTAL
DL\$

SERVICE REPRESENTATIVE <u>Allen F. Worth</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OR

BASIC

energy services, L.P.

TREATMENT REPORT

Customer F.G. Holl Co. LLC	Lease No.	Date
Lease Fracture 'B'	Well # 1-12	10-14-10
Field Order # 02697A	Station Pratt	County Kans.
Type Job 4 1/2" Basket Shoe L.S. CNU	Formation TD 4650	Legal Description 12-22-19

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size 4 1/2"	Tubing Size	Shots/Ft	35 sks	Acid 60/40 Poz 4% gel @ 12#	RATE	PRESS	ISIP
Depth 2491	Depth	From	To 50 sks	Pre Pad 60/40 Poz 4% gel @ 12#	Max	4	Plug Arbuckle
Volume 39 Bbl	Volume	From	To 175 sks	Pad AA 2 @ 15#	Min.		SCAVENGER
Max Press 1500#	Max Press	From	To 30 sks	Frac 60/40 Poz 4% gel	Avg		15 Min.
Wall Connection PC	Annulus Vol.	From	To 20 sks	60/40 Poz 4% gel	JHP Used		Annulus Pressure
Plug Depth 2458.6	Packer Depth	From	To	Flush Disp H2O	Gas Volume		Total Load

Customer Representative Rob Long	Station Manager Scotty	Treater Allen F. Werth
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
4:00 pm	11-13	10			Duke #2
					On loc. Discuss Safety Setup Plan Job
5:30			10	3	Rig cir. @ 4570 To Plug Arb.
			10	3	Pump 10 Bbls H2O
			3	3	Mix + Pump 35 sks 60/40 Poz 4% gel @ 12#
			58	7	Pump 3 Bbls H2O
5:50					Pump 58 Bbls mud
12:47 AM 11-14-10					Pull + Lay down Drill Pipe.
					Start 4 1/2" casing shoe Jt. 32. 12
					Basket shoe + L.D. Baffle in collar
1:20					cent-1-3-4-5-6-7 Basket on 2-Jt casing @ 2491 Hookup + cir w/ swedge.
1:45	2000#				Drop BALL to set Basket Shoe
	200#		12	5	set shoe w/ Pump truck
				5	Start 12 Bbls Superflush
			12	5	Pump 5 Bbls H2O space
			32	5	Mix + Pump 50 sks 60/40 SCAVENGER @ 12#
					Mix + Pump 125 sks AA 2 @ 15#
					Finish mix, washout Pump Line
					Drop L.D. Plug start Disp.
0:15	1500#				caught lift 15 Bbl out
					Plus down - Release OK. Plug R.H. 4M H. 50 sk

10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 02691 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>11-3-10</u> DISTRICT <u>KANSAS</u>		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:						
CUSTOMER <u>FG. Hall Company LLC</u>		LEASE <u>Froetschauer's</u> WELL NO. <u>1-27</u>						
ADDRESS _____		COUNTY <u>Pawnee 13-23-19</u> STATE <u>Kansas</u>						
CITY _____ STATE _____		SERVICE CREW <u>A. Weath, D. Phya, M. McGowan</u>						
AUTHORIZED BY _____		JOB TYPE: <u>8 5/8" Surface</u>						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	ARR. TIME
<u>28443</u>	<u>PU</u>						<u>11-3-10</u>	<u>10:15</u>
<u>19889-19842</u>	<u>1 1/2</u>					ARRIVED AT JOB	<u>11-3-10</u>	<u>AM</u>
<u>19960-19918</u>	<u>1 1/2</u>					START OPERATION	<u>11-3-10</u>	<u>AM</u>
<u>19876-19860</u>	<u>1 1/2</u>					FINISH OPERATION	<u>11-3-10</u>	<u>AM</u>
						RELEASED	<u>11-3-10</u>	<u>AM</u>
						MILES FROM STATION TO WELL	<u>75 miles</u>	

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP101	A-con Blend Common	SK	375		
CP100	Common	SK	150		
CC102	cell FLAKE	lb	131		
CC109	Calcium Chloride	lb	1341		
CF106	Top Rubber cement Plug 8 5/8"	EA	1		
CF1753	Centralizer 8 5/8 Blue	EA	3		
E100	unit mileage Charge Pickup	mi	75		
E101	Heavy Equip mileage	mi	225		
E113	Bulk Delivery Charge	TR	1		
CF202	Depth Charge 1001-2000	4-hrs	1		
CF240	Blending & mixing service charge	SK	525		
CF504	Plug container Utilization Chg	Job	1		
S003	Service Supervisor first 8hrs on loc	EA	1		

CHEMICAL / ACID DATA:			

SUB TOTAL	
SERVICE & EQUIPMENT	%TAX ON \$
MATERIALS	%TAX ON \$
TOTAL:	

SERVICE REPRESENTATIVE <u>A. Weath</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY <u>[Signature]</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
FIELD SERVICE ORDER NO. _____	

BASIC

energy services, LP

TREATMENT REPORT

Customer F.C. Hall Company LLC	Lease No.	Date 11-3-10
Lease Brookview Trust B	Well # 1-12	
Field Order # A2691A	Station Pratt KS	Casing 8 5/8
Type Job 8 5/8 SURFACE	Depth 1159	County Lawnee
	Formation CNUW TO 1160	State KANSAS
		Legal Description 12-22-19

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 5/8	Tubing Size	Shots/Ft	375 sk	Acid	A-CON 12.6	1/2 gal	RATE	PRESS
Depth 1159	Depth	From	To 150 sk	Pre Pad	Common 2	1/4" Flouche	5 Min	ISIP
Volume 22550	Volume	From	To	Pad			10 Min	
Max Press 530	Max Press	From	To	Frac			15 Min	
Well Connection PC	Annulus Vol.	From	To				HHP Used	Annulus Pressure
Plug Depth 1139	Packer Depth	From	To	Flush	A-SP w/ H ₂ O		Gas Volume	Total Load

Customer Representative: Armbuster Station Manager: Scotty Treater: Allen F. Werth

Service Units	28443	33708	19842	Date	Phye	Mike McGraw		
Driver Names	Werth	Jaer	Melton	19960	19915	19820	19860	

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1115					ON Loc. Discuss Safety, Setup Plan Job
1140					Going Back in hole after Short Trip
1210					CIR @ 1159 Total Depth 1160'
100					Start out of Hole w/ Bit.
115					out of Hole w/ Bit.
200					Run Back in Hole w/ Drill Pipe
					To Run Another Straight Hole Test
300					start out of Hole w/ Bit.
					out of hole, Rig up to Run 8 5/8" 24'
436					Start casing - cent 1st @ 1100
450			140	5 1/2	2nd @ 500 3rd @ 80'
					CASING @ 1159 CIR w/ Rig.
530			22	5 1/2	Start mix 375 SKS A-CON @ 12.6'
					5 1/2 start mix 150 sk con w/ 20% CC
545			72	2	1/4" Cell Flake @ 15.6'
					Finish mix, Drop Top Rubber Plug 8 5/8
					Start A-SP
					Plug down, shut in @ well
					Release PST @ washup + Rack up
					Job complete
					sent CIR To P.T

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