

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 33594

Name: Quito, Inc.

Address 1: 1613 W. 6th Street

Address 2: _____

City: Bartlesville State: OK Zip: 74003 + 3712

Contact Person: Mark W. McCann

Phone: (918) 337-4747

CONTRACTOR: License # 849 34069

Name: Basic Energy Services

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- 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 #: _____

~~02-19-2011~~ 9/29/10 02-19-2011 02-19-2011

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 019-27013-00-00

Spot Description: _____

NE NW NW NW Sec. 25 Twp. 34 S. R. 10 East West

300 Feet from North / South Line of Section

600 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Chautauqua County

Lease Name: Sears Well #: M-1

Field Name: Elgin

Producing Formation: Mississippi

Elevation: Ground: 926 Kelly Bushing: _____

Total Depth: 1600 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 40 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: 10000 ppm Fluid volume: 30 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: [Signature]

Title: President Date: 03-28-2011

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: [Signature] Date: 4/1/11

RECEIVED

MAR 31 2011

KCC WICHITA

Operator Name: Quito, Inc. Lease Name: Sears Well #: M-1
 Sec. 25 Twp. 34 S. R. 10 East West County: Chautauqua County

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: attached	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input 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
Ground Water Protection	10"	8 5/8"	15	44'	Portland	10	NA
Zone Protection	6 3/4"	4 1/2"	11.69	1500'	Portland	165	5% Salt

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
2	1384-1394		

TUBING RECORD:	Size: 2 3/8"	Set At: 1400'	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. Not producing, yet.		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>Well not producing, yet.</u>		
Estimated Production Per 24 Hours	Oil Bbts.	Gas Mcf	Water Bbts.	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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>1384-1394</u>
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Invoice

McCANN SUPPLY, CO.

1613 West 6th Street
Bartlesville, OK 74003

Telephone: 918-3374747

Date: 10-Feb-10

Invoice No. 5

To: Quito, Inc.
1613 W. 6th St.
Bartlesville, OK 74003

Date	Qty.Pounds	Description	Unit Price	Line Total
10/02/10	10.00	Sacks Portland cement	\$ 8.00	\$ 80.00

SUBTOTAL	\$ 80.00
TAX RATE	9.80%
SALES TAX	7.84
OTHER	-
TOTAL	\$ 87.84

Seans
m-l
OK
M

Make all checks payable to McCANN SUPPLY, CO.

Thank you for your business!

1613 West 6th St. Bartlesville, OK 74003

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MAR 31 2011
KCC WICHITA



OILWELL CEMENTERS, INC

P.O. BOX 510 - PHONE (580) 229 - 1776
HEALDTON, OKLAHOMA 73438

P.O. NO. _____
DATE 10/7/2010

McCANN

NAME OF COMPANY _____ MAILING ADDRESS _____

WELL OWNER _____ MAILING ADDRESS _____

NAME OF CONTRACTOR _____ MAILING ADDRESS _____

TERMS: Accounts Due and Payable Upon Receipt 1.5% (18% per yr) Finance charge Added to Accounts 30 Days Past Due.

This cementing equipment and service men are to be under the control and supervision of the well owner or his representative and as a part of the consideration thereof, it is expressly stated the OILWELL CEMENTERS, INC shall not be liable or responsible for any loss or damage to this well

Well owner or his Representative

FARM _____ WELL NO. _____
COUNTY _____ SEC _____ TWN _____ RGE _____

KIND OF JOB _____ LONG STRING _____ TRUCK NO. _____ BULK CEMENT _____

SIZE OF PIPE 4 1/2" SIZE OF HOLE 6 1/4" CEMENT 165 SACKS @ \$10.50 \$1,732.50

DEPTH OF _____ DEPTH OF _____ ASH MIX _____ SACKS @ \$10.50 \$0.00

WELL _____ WELL CEMENTED 1500' PLUG STOPPED _____ % GEL _____ SACKS @ _____ \$0.00

KIND OF CEMENT _____ REG 10% SALT-1/4#FS _____ CACL @ \$0.60 \$0.00

ASH MIX _____ 50 FLO-CELE @ \$2.50 \$125.00

AMOUNT _____ 165 SK 1500' FILL W/30% EXCESS _____ 700 SALT @ \$0.50 \$350.00

PRESSURE _____ MAXIMUM _____ MINIMUM _____ 1 TRP @ \$55.00 \$55.00

TIME OUT _____ ON LOC _____ @ _____ \$0.00

JOB STARTED _____ COMPLETE _____ 2 SK GEL @ \$15.00 \$30.00

TYPE FLOATING EQUIPMENT _____ @ _____ \$0.00

PRICE REF. NO. 1 @ \$695.00 \$695.00 @ _____ \$0.00

1500 FEET @ \$0.25 \$375.00 @ _____ \$0.00

63 TRUCK MILES @ \$2.00 \$126.00 @ _____ \$0.00

PICKUP MILES @ \$2.00 \$0.00 @ _____ \$0.00

CONN. OVER 6 FT. @ \$650.00 \$0.00 @ _____ \$0.00

EXTRA HRS ON LOC. @ \$250.00 \$0.00 @ _____ \$0.00

PLUG CONTAINER @ \$0.00 \$0.00 @ _____ \$0.00

_____ @ \$0.00 \$0.00 @ _____ \$0.00

_____ @ \$0.00 \$0.00 @ _____ \$0.00

_____ @ \$0.00 \$0.00 @ _____ \$0.00

_____ @ \$0.00 \$0.00 @ _____ \$0.00

_____ @ \$0.00 \$0.00 @ _____ \$0.00

_____ @ \$0.00 \$0.00 @ _____ \$0.00

PUMP TRUCK CHARGES \$1,196.00 TOTAL MATERIALS \$3,055.66

PUMP TRUCK \$1,196.00

Sub Total \$4,251.66

Discount 10% \$425.17

TOTAL \$3,826.50

TRUCK NO. _____
CEMENTER STEVE O'DELL

HELPER: D HAMPTON, L HENDERSON

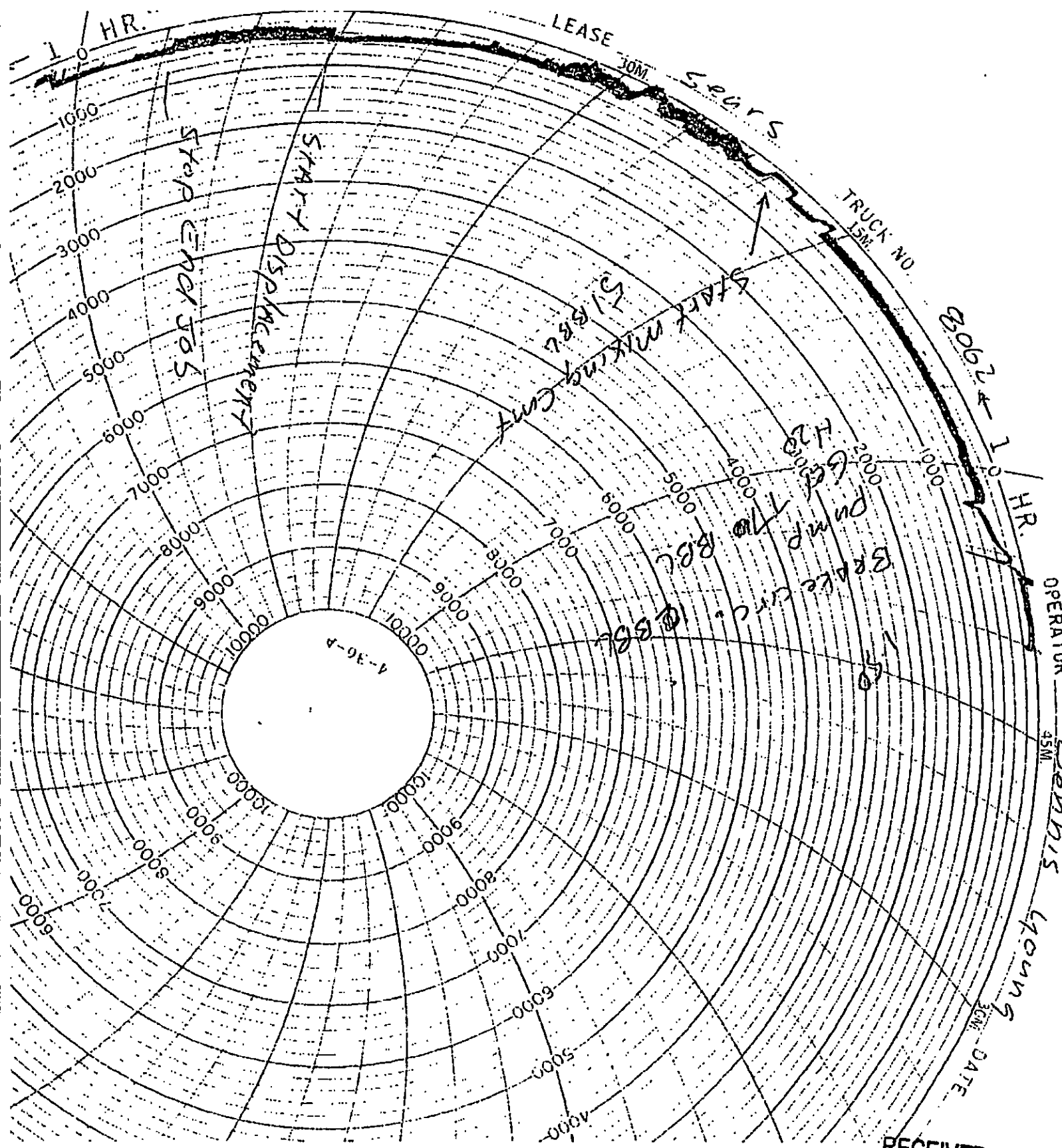
REMARKS:

Handwritten notes:
3910
3170

Handwritten signature: M. M. [Signature]

INVOICE NO. _____
CROSSER HOLDING RECEIVED
Seaf MAR 31 2011

KCC WICHITA



OPERATOR STERNIS

Young

DATE

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 KCC WICHITA



BASIC
ENERGY SERVICES

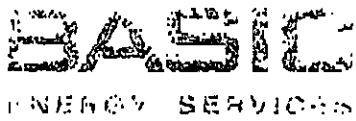
Cement Treatment Report

Customer	MC CANN COMPANIES			Lease No.		Date	2/19/2011
Lease	SEARS			Well #	M1	Service Receipt	03803A
Casing	4 1/2	Depth	1400;	County	CHAUTAUQUA	State	KANSAS
Job Type	TOP OUT		Formation	Legal Description			
Pipe Data				Perforating Data		Cement Data	
Casing size	4 1/2 11.6#		Tubing Size	Shots/Ft		Lead	
Depth	1400'		Depth	From	1090	To	220 SKS 50:50 POZ WITH CLASS H 5% SALT .25 FLAKES
Volume			Volume	From		To	
Max Press	1000		Max Press	From		To	Tail in
Well Connection	4 1/2 8RD		Annulus Vol.	From		To	
Plug Depth			Packer Depth	From		To	
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log		
1:50 AM	900		12	3	BREAK CIRC WITH FRESH H2O		
	400		77	3	START CIRC WITH GEL H2O		
	300		51	2	START MIXING & PUMP CEMENT		
					STOP WASH PUMP & LINES, DROP PLUG		
					START DISPLACEMENT		
2:55	500		16.3	2	STOP DISPLACEMENT		
					SHUT IN		
					END JOB		
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Service Units	8062		19715				
Driver Names	TIM RANEY		JARED G				

MARK MCCANN
Customer Representative

LYNN WEITZ
Station Manager

DENNIS YOUNG
Cementer



1 0 1 1	1000840	02/21/2011
INVOICE NUMBER		
1712 - 90527683		

Cushing (918) 225-6480

B MCCANN COMPANIES
 I 1613 W 6TH ST
 L BARTLESVILLE
 OK US 74003
 T
 O ATTN:

*Sears
M-1*

J LEASE NAME SEARS M-1
 O LOCATION
 B COUNTY CHAUTAUQUA
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

2/23/11

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40286882	8062		Cash Sale	02/21/2011

For Service Dates: 02/19/2011 to 02/19/2011

0040286882
TOP OUT

171203803A Cement-New Well Casing/Pi 02/19/2011

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
Mileage	50.00	MI	2.23	111.29
Mileage	100.00	MI	3.67	366.60
CEMENT DELIVERY	485.00	EA	0.84	406.41
Pump Charge-Hourly CEMENT	1.00	HR	523.72	523.72
Mixing Plant	220.00	HR	0.73	161.31
Chart Recorder	1.00	EA	183.30	183.30
50:50 POZ WITH CLASS H Cement	220.00	EA	9.43	2,073.94 T
CELLO FLAKE	55.00	EA	1.94	106.58 T
DEFOAMER	2.00	EA	23.57	47.13 T
BENTONITE GEL 2%	4.00	EA	28.81	115.22 T
ROCK SALT	496.00	EA	0.26	129.88 T
4 1/2 TOP RUBBER PLUG	1.00	EA	41.90	41.90

PAID

CK NO. 3251
 DATE 2/19/11

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