



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33936

Name: Griffin, Charles N.

Address 1: PO BOX 347

Address 2:

City: PRATT State: KS Zip: 67124 + 0347

Contact Person: Charles N. Griffin

Phone: (720) 490-5648

CONTRACTOR: License # 5822

Name: Val Energy, Inc.

Wellsite Geologist: Bruce A. Reed

Purchaser: Plains Marketing/West Wichita Gas Gathering

Designate Type of Completion:

- Checkboxes for completion types: New Well, Re-Entry, Workover, Oil, Gas, OG, CM, Cathodic, WSW, D&A, ENHR, GSW, SWD, ENHR, SIGW, SIOW, Temp. Abd.

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

Operator:

Well Name:

Original Comp. Date: Original Total Depth:

- Checkboxes for completion details: Deepening, Re-perf., Conv. to ENHR, Conv. to SWD, Conv. to GSW, Plug Back, Commingled, Dual Completion, SWD, ENHR, GSW, Permit #.

06/03/2010 06/12/2010 06/23/2010
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-077-21681-00-00

Spot Description:

SW NE SE Sec. 11 Twp. 34 S. R. 9 East West
1,650 Feet from North South Line of Section
990 Feet from East West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- Checkboxes for corner footages: NE, NW, SE, SW

County: Harper

Lease Name: FANNING Well #: 2

Field Name: Hibbord North East

Producing Formation: Mississippi

Elevation: Ground: 1303 Kelly Bushing: 1313

Total Depth: 5090 Plug Back Total Depth: 5058

Amount of Surface Pipe Set and Cemented at: 268 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: 0 ppm Fluid volume: 0 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 #:

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

- Checkboxes for office use: Letter of Confidentiality Received, Confidential Release Date, Wireline Log Received, Geologist Report Received, UIC Distribution, ALT I II III, Approved by: Deanna Garrison Date: 05/19/2011



1052866

Operator Name: Griffin, Charles N. Lease Name: FANNING Well #: 2
 Sec. 11 Twp. 34 S. R. 9 East West County: Harper

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 (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Kansas City	4036	2718
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Bottom Kansas City	4268	2950
Electric Log Submitted Electronically (If no, Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Cherokee	4444	3126
		Mississippi	4562	3245

List All E. Logs Run:

Dual Induction Log
Compensated Density Neutron Log
Cement Sonic Bond Log

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	8.625	23	268	Common	300	Salt, Gas Blok, Gilsonite
Production	7.875	5.5	15.5	5069	AA2	250	

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
3	4574-4581	2000 Gals 15% HCL	
		457 bbls Profrac 2500	
		16000# 20/40 Sand	

TUBING RECORD:	Size: <u>2.875</u>	Set At: <u>4580</u>	Packer At: <u>N/A</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>06/24/2010</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls. <u>15</u>	Gas Mcf <u>30</u>	Water Bbls. <u>300</u>	Gas-Oil Ratio <u>31</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>4574-4581</u>
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BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 02130 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>6-13-10</u> DISTRICT <u>Pratt</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>Grist in Management</u>		LEASE <u>Farming</u> WELL NO. <u>2</u>							
ADDRESS		COUNTY <u>Hwy Per</u> STATE <u>153</u>							
CITY STATE		SERVICE CREW <u>Sullivan Melson Phys</u>							
AUTHORIZED BY		JOB TYPE: <u>onw 5" L.S.</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>19939</u>	<u>20920</u>						<u>6-13-10</u>	<u>AM</u>	<u>11:30</u>
<u>19960</u>	<u>19915</u>							<u>AM</u>	<u>3:20</u>
<u>19967</u>								<u>PM</u>	<u>0220</u>
								<u>PM</u>	<u>0800</u>
								<u>AM</u>	<u>0830</u>
						MILES FROM STATION TO WELL	<u>65</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: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA 2 Cement	SK	300		5100 00
CC 111	SALT	lb	1372		686 00
CC 112	Cement Friction Reducer	lb	141		846 00
CC 115	Gas-BLOKs	lb	282		1952 30
CC 201	GILSONITE	lb	1500		1005 00
CF 607	Latch Down Plug	eq	1		400 00
CF 1251	Auto Fill Float Shoe	eq	1		360 00
CF 1651	Turbolizer	eq	10		1100 00
CF 1901	Basket	eq	1		290 00
C 704	ISCL	gal	800		175 00
CC 151	Mud Flush	gal	500		430 00
E 100	Mileage Pickup	Mi	65		276 25
E 101	Heavy Equipment Mileage	Mi	130		910 00
E 113	BULKY Delivery	TM	917		1466 40
CE 206	Depth Charge	Yhrs	1		2850 00
CE 240	Blending & Mixing	SK	300		920 00
CE 504	Plug Container Charge	JOB	1		250 00
S 003	Service Supervisor	eq	1		175 00

SUB TOTAL

CHEMICAL / ACID DATA:			

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

TOTAL KG 10386 51

SERVICE REPRESENTATIVE [Signature] THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



BASIC
ENERGY SERVICES
PRESSURE PUMPING'S WIRELINE

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

FIELD SERVICE TICKET

1718 1549 A

DATE TICKET NO.

DATE OF JOB <i>06-04-80</i> DISTRICT <i>Pratt</i>		NEW WELL <input type="checkbox"/> OLD WELL <input checked="" type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:							
CUSTOMER <i>Griffin Management</i>		LEASE <i>Farming</i> WELL NO. <i>2</i>							
ADDRESS		COUNTY <i>BARNES</i> STATE <i>KS</i>							
CITY STATE		SERVICE CREW <i>Sullivan, Ardrey, Adams, Go</i>							
AUTHORIZED BY		JOB TYPE <i>CNW 8 3/4 Surface</i>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <i>06-04-80</i>	DATE	AM	TIME
<i>19959/20920</i>	<i>20</i>							PM	<i>1330</i>
<i>19831/19867</i>	<i>20</i>					ARRIVED AT JOB		AM	<i>1600</i>
<i>19867</i>						START OPERATION		AM	<i>1650</i>
						FINISH OPERATION		AM	<i>1710</i>
						RELEASED		AM	<i>1730</i>
						MILES FROM STATION TO WELL			<i>65</i>

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
CP 100	Common ent	SK	175		2,800 00
CC 102	cellulose	lb	44		162 80
CC 109	Calcium chloride	lb	495		519 75
CF 152	wooden plug 8 3/4	EA	1		160 00
E 100	putty moly	mi	65		276 25
E 101	Heavy Equip moly	mi	130		910 00
E 113	Bulk Delivery	Ton	536		858 00
CE 200	Depth change 0-500'	SH	1		1,000 00
CE 240	Blenders - mixing chnse	SK	175		245 00
CE 504	Plug Constanta Rented	PA	1		250 00
S 003	Sullivan Superlime	TA	1		175 00

SUB TOTAL

CHEMICAL / ACID DATA:			

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

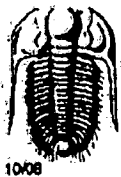
TOTAL

Thank you

4,193 38
DLS

SERVICE REPRESENTATIVE <i>Robert Williams</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO.



TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

NO. 36907

Well Name & No. Fanning # 2 Test No. 1 Date 6-9-10
 Company Charles N. Griffin Elevation 1313 KB 1303 GL
 Address P.O. Box 347 Pratt, Kansas 67124
 Co. Rep / Geo. Bruce Reed Rig Val # 5
 Location: Sec. 11 Twp. 34s Rge. 9w Co. Harper State Ks.

Interval Tested 4568-4585 Zone Tested Mississippi
 Anchor Length 17' Drill Pipe Run 4553 Mud Wt. 9.5
 Top Packer Depth 4563 Drill Collars Run 0 Vis 49
 Bottom Packer Depth 4568 Wt. Pipe Run 0 WL 12.4
 Total Depth 4585 Chlorides 5,000 ppm System LCM 0
 Blow Description IF: Strong blow. B.O.P. in 1 min.
TST: No blow.
FF: Strong blow. B.O.P. immediately.
FSI: Weak blow. Built to 1/2" GTS in 35 mins.

Rec	Feet of	%gas	%oil	%water	%mu
<u>75</u>	<u>56+0cm</u>	<u>10</u>	<u>5</u>	<u>85</u>	
<u>0</u>	<u>4478' GIP</u>				

Rec Total 75 BHT 133 Gravity N/C API RW N/A @ — F Chlorides — pp

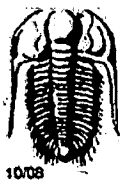
(A) Initial Hydrostatic 2232 Test 1900 T-On Location
 (B) First Initial Flow 24 Jars 2021 T-Started
 (C) First Final Flow 25 Safety Joint 2303 T-Open
 (D) Initial Shut-In 838 Circ Sub 0218 T-Pulled
 (E) Second Initial Flow 30 Hourly Standby 0423 T-Out
 (F) Second Final Flow 32 Mileage 136 R.T. Comments
 (G) Final Shut-In 1030 Sampler
 (H) Final Hydrostatic 2186 Straddle
 Shale Packer
 Extra Packer
 Extra Recorder
 Day Standby
 Accessibility

Initial Open 30 Ruined Shale Packer
 Initial Shut-In 45 Ruined Packer
 Final Flow 60 Extra Copies
 Final Shut-In 60 Sub Total
 Total

Approved By Bruce Reed Our Representative Jerry Adams Thank You.

TriLOBITE Testing Inc. shall not be liable for damaged or any kind of the property of personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

785-450-5124



TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

No. 36908

Well Name & No. Fanning #2 Test No. 2 Date 6-10-10
 Company Charles N. Griffin Elevation 1313 KB 1303 GL
 Address P.O. Box 347 Pratt, Kansas 67124
 Co. Rep / Geo. Bruce Reed Rig Val #5
 Location: Sec. 11 Twp. 34s Rge. 9w Co. Harper State Ks.

Interval Tested 4585-4600 Zone Tested Mississippi
 Anchor Length 15' Drill Pipe Run 4584 Mud.Wt. 9.4
 Top Packer Depth 4580 Drill Collars Run 0 Vis 48
 Bottom Packer Depth 4585 Wt. Pipe Run 0 WL 10.0
 Total Depth 4600 Chlorides 6,000 ppm System LCM 0
 Blow Description IF: Strong blow. B.O.B. in 1 min. 45 secs.
ISI: No blow.
FF: Strong blow. B.O.B. immediately. GTS in 13 mins (see gas flow report)
FSI: No blow.

Rec	Feet of	%gas	%oil	%water	%ml
80	HGM + WCO	23%	45%	10%	22%
0	4504' GTP				

Rec Total 80 BHT 127 Gravity N/C API RW N/C @ — °F Chlorides — pp

(A) Initial Hydrostatic 2264 Test 1015 T-On Location
 (B) First Initial Flow 25 Jars 1043 T-Started
 (C) First Final Flow 34 Safety Joint 1230 T-Open
 (D) Initial Shut-In 1233 Circ Sub 1545 T-Pulled
 (E) Second Initial Flow 34 Hourly Standby 1810 T-Out
 (F) Second Final Flow 50 Mileage 136 R.T. Comments
 (G) Final Shut-In 1169 Sampler
 (H) Final Hydrostatic 2327 Straddle
 Shale Packer Ruined Shale Packer
 Extra Packer Ruined Packer
 Extra Recorder Extra Copies
 Day Standby Sub Total
 Accessibility Total
 Sub-Total

Initial Open 30
 Initial Shut-In 45
 Final Flow 60
 Final Shut-In 60

Approved By Bruce Reed Our Representative Jerry Adams Thank You

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