

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 # 34357
Name: ATLAS OPERATING LLC
Address 1: 15603 KUYKENDAHL RD SUITE 200
Address 2: _____
City: HOUSTON State: TX Zip: 77090 + 3655
Contact Person: RAMY H. FARRAG
Phone: (281) 893-9400
CONTRACTOR: License # 5822
Name: VAL ENERGY
Wellsite Geologist: PAT DEENIHAN
Purchaser: PIONEER / NCRA

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 #: _____
11/08/2010 11/15/2010 12/19/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 077-21715-00-00
Spot Description: _____
S2 S2 N2 Sec. 32 Twp. 31 S. R. 9 East West
1,270 Feet from North / South Line of Section
2,640 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Harper
Lease Name: Greens Well #: 6
Field Name: Spivey Grabs-Basil
Producing Formation: Mississippi
Elevation: Ground: 1616 Kelly Bushing: 1626
Total Depth: 4600 Plug Back Total Depth: 4510
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: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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: Ramy H. Farrag
Title: PRODUCTION COORDINATOR Date: 04/25/2011

KCC Office Use **RECEIVED**

Letter of Confidentiality Received
Date: MAY 02 2011
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dg Date: 5/10/11

Operator Name: ATLAS OPERATING LLC

Lease Name: Greens

Well #: 6

Sec. 32 Twp. 31 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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i></p> <p>List All E. Logs Run: CNL/CDL, DIL, CBL</p>	<p><input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Lansing</td> <td>3709</td> <td>-2083</td> </tr> <tr> <td>Stark shale</td> <td>4151</td> <td>-2525</td> </tr> <tr> <td>Cherokee Shale</td> <td>4379</td> <td>-2753</td> </tr> <tr> <td>Mississippi</td> <td>4412</td> <td>-2786</td> </tr> <tr> <td>Miss. Porosity</td> <td>4418</td> <td>-2792</td> </tr> </table>	Name	Top	Datum	Lansing	3709	-2083	Stark shale	4151	-2525	Cherokee Shale	4379	-2753	Mississippi	4412	-2786	Miss. Porosity	4418	-2792
Name	Top	Datum																	
Lansing	3709	-2083																	
Stark shale	4151	-2525																	
Cherokee Shale	4379	-2753																	
Mississippi	4412	-2786																	
Miss. Porosity	4418	-2792																	

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	12-1/4"	8-5/8"	23	268	60/40 poz	200	3% CC w 1/4 #Cell Flake, Cal set
Production	7-7/8 "	4-1/2 "	10.5	4567	AA2	205	5% salt, gilsonite

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	4418-27	1000 Gals 15 % HCL	4418-4427
		Frac'd w/ 24,000 lbs Sand 355 bbls of Fluid	4418-4427

TUBING RECORD:		Size: 2-3/8"	Set At: 4423	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. 12/28/2010		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. 2	Gas Mcf 50	Water Bbls. 5	Gas-Oil Ratio 25,000	Gravity 25

<p>DISPOSITION OF GAS:</p> <p><input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-1B.)</i></p>	<p>METHOD OF COMPLETION:</p> <p><input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i></p> <p><input type="checkbox"/> Other (Specify) _____</p>	<p>PRODUCTION INTERVAL:</p> <p>_____</p> <p>_____</p>
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301987

PAGE 1 of 1	CUST NO 1003241	INVOICE DATE 11/17/2010
INVOICE NUMBER 1718 - 90459093		

Pratt (620) 672-1201
 B ATLAS OPERATING LLC
 I 15603 KUYKENDAHL, STE 200
 L HOUSTON
 L TX US 77090
 T
 O ATTN:

J LEASE NAME Green 6
 O LOCATION
 B COUNTY Harper
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 S JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40253705	20920		Net - 30 days	12/17/2010	
For Service Dates: 11/16/2010 to 11/16/2010					
0040253705					
171803079A Cement-New Well Casing/Pi 11/16/2010 4 1/2" Longstring					
AA2 Cement		265.00	EA	11.73	2,991.15 T
De-foamer (Powder)		60.00	EA	2.76	165.80 T
Salt (Fine)		1,398.00	EA	0.35	482.31 T
Cal-Set		1,200.00	EA	0.52	621.00 T
Gas-Blok		240.00	EA	3.55	852.84 T
FLA-322		120.00	EA	5.18	621.00 T
Gilsonite		1,275.00	EA	0.46	589.43 T
Top Rubber Cement Plug 4 1/2"		1.00	EA	55.20	55.20
Guide Shoe-Regular 4 1/2" (Blue)		1.00	EA	155.25	155.25
Flapper Type Insert Float Valves 4 1/2"		1.00	EA	138.00	138.00
Turbolizer 4 1/2" (Blue)		6.00	EA	58.85	351.90
CS-1L KCL Substitute		3.00	EA	24.15	72.45 T
Super Flush II	160015	500.00	EA	1.06	527.85 T
Heavy Equipment Mileage		120.00	MI	4.83	579.60
Blending & Mixing Service Charge		255.00	MI	0.97	248.33
Depth Charge; 4001-5000'		1.00	HR	1,738.80	1,738.80
Proppant and Bulk Delivery Charges		720.00	MI	1.10	794.88
Casing Swivel Rental		1.00	EA	138.00	138.00
Plug Container Utilization Charge		1.00	EA	172.50	172.50
Supervisor		1.00	HR	120.75	120.75
Unit Mileage Charge-Pickups, Vans & Cars		80.00	HR	2.93	175.85
PLEASE REMIT TO:			SEND OTHER CORRESPONDENCE TO:		
BASIC ENERGY SERVICES, LP		BASIC ENERGY SERVICES, LP		SUB TOTAL	11,590.79
PO BOX 841903		PO BOX 10460		TAX	436.19
DALLAS, TX 75284-1903		MIDLAND, TX 79702		INVOICE TOTAL	12,026.98

RECEIVED
 MAY 02 2011
 KCC WICHITA
 RECEIVED
 MAY 02 2011
 KCC WICHITA



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 03030 A

DATE _____ TICKET NO. _____

DATE OF JOB <i>11-16-10</i>		DISTRICT <i>PRATT KS</i>		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 <i>Atlas OPERATING</i>				LEASE <i>Green</i>		6		WELL NO.	
ADDRESS				COUNTY <i>HARPER</i>		STATE			
CITY				STATE		SERVICE CREW <i>Sullivan, Molen, Pyle</i>			
AUTHORIZED BY				JOB TYPE: <i>CNW 4 1/2 long Sta</i>					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<i>33208-20920</i>							<i>11-16-10</i>		<i>0740</i>
<i>19960-19918</i>						ARRIVED AT JOB		AM	<i>0620</i>
<i>19867</i>						START OPERATION		AM	<i>0705</i>
						FINISH OPERATION		AM	<i>0744</i>
						RELEASED	<i>11-16-10</i>	AM	<i>0830</i>
						MILES FROM STATION TO WELL			<i>60</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: *Robert Williams*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<i>CE 504</i>	<i>plus container Rental</i>	<i>SA</i>	<i>1</i>		<i>250 00</i>
<i>S 003</i>	<i>Service Supervisors</i>	<i>SA</i>	<i>1</i>		<i>175 00</i>
<i>P 100</i>	<i>truck mileage</i>	<i>mi</i>	<i>60</i>		<i>235 00</i>

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KCC WICHITA

CHEMICAL / ACID DATA:			

SUB TOTAL
SERVICE & EQUIPMENT %TAX ON \$
MATERIALS %TAX ON \$
TOTAL *11,590.79*
Thank You
DLS

SERVICE REPRESENTATIVE: *Robert Williams* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Robert Williams*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

BASIC

energy services, L.P.

TREATMENT REPORT

Customer: Atlas Operating	Lease No.:	Date: 11-16-10
Lease: 9000	Well #: 6	
Field: 3079	Station: PRATT	Casing: 4 1/2
Type Job: CNW 4 1/2 long string	Formation:	County: HARPER
		State: KS
		Legal Description: 32-37-9

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size: 4 1/2	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
Depth: 7604	Depth	From	To	Pre Pad	Max		5 Min.	
Volume: 72 1/2	Volume	From	To	Pad	Min		10 Min.	
Max Press: 1500	Max Press	From	To	Frac	Avg		15 Min.	
Well Completion: 4201	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative:	Station Manager: DAVE SCOTT	Treater: Robert Fullmer
Service Units: 19867 33706 20970 19960 19918		
Driver Names: Sullivan melson phye		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
0630					on loc. soft, moist
					Run 114 str 4 1/2 10.5 csp.
					cent 1, 3, 5, 7, 9, 11
0520					CASING ON BOTTOM
0530					Hook Rig to circ.
0705	750		12	3	sk Super Fluid
			5		sk spacer
				5.5	mix cmt 205 sk AA-2 cmt
			52		cmt mixed, shut down, wash, pump/under
					Release Plug
0726	200			6	sk Disp w 2 1/2 KCL
5	350		54		lift rig
0740	1800		72 1/2	4	plug down
			6		plug RH w/ 30 sk
			4		plug MH w/ 20 sk
					JOB Complete

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MAY 02 2011
KCC WICHITA

Thank you



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 03079 A

DATE TICKET NO. CONT

DATE OF JOB: <u>11-16-10</u> DISTRICT: <u>Pratt KS</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>Atlas Operating</u>		LEASE: <u>green</u> WELL NO.: <u>6</u>							
ADDRESS:		COUNTY: <u>HARPER</u> STATE: <u>KS</u>							
CITY: STATE:		SERVICE CREW: <u>Sullivan, Madson, Phye</u>							
AUTHORIZED BY:		JOB TYPE: <u>new 4 1/2 long string</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>33706-20920</u>	<u>3 hr</u>						<u>11-16-10</u>		<u>0400</u>
<u>19960-19914</u>	<u>3 hr</u>					ARRIVED AT JOB		AM	<u>0630</u>
<u>19867</u>	<u>3 hr</u>					START OPERATION		AM	<u>0700</u>
						FINISH OPERATION		AM	<u>0740</u>
						RELEASED	<u>11-16-10</u>	AM	<u>0830</u>
						MILES FROM STATION TO WELL			<u>60</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: Robert Hoanai
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA-2 cmt	SK	205		3465 00
CP 105	AA-2 cmt	SK	50		850 00
CC 105	De Gomer	lb	60		240 00
CC 111	Salt	lb	1398		699 00
CC 113	Cal-Saf	lb	1,200		900 00
CC 115	CAS 110K	lb	240		1,236 00
CC 129	FLA-322	lb	120		900 00
CC 201	oil/squirt	lb	1275		254 25
CF 102	Rubber Plug 4 1/2	SA	1		30 00
CF 250	guide shoe	SA	1		225 00
CF 1450	Flapper 3 1/2 x Foot	SA	1		200 00
CF 1650	Tubdizer	SA	6		510 00
C 704	KCL Sub	SKL	3		105 00
CC 185	Super Fluid Th	SKL	500		765 00
E 101	Heavy 8cmt mlge	mi	120		840 00
CE 240	Bleeding mixing	SK	255		357 00
E 113	Bulk Delivery	mi	720		1,152 00
CE 205	Depth change 4000-5000'	KCC MICHITATA	1		2,520 00
CE 501	CAS/DI Social Rental	SA	1		200 00

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MAY 02 2011
KCC MICHITATA

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

CHEMICAL / ACID DATA:			

SERVICE REPRESENTATIVE: Robert Hoanai THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Robert Hoanai
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



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

FIELD SERVICE TICKET
 1718 09000 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>11/11/11</u>		DISTRICT <u>A-117</u>	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 <u>A+117</u>				LEASE <u>Wichita</u>			WELL NO. _____	
ADDRESS _____				COUNTY <u>Wichita</u>			STATE _____	
CITY _____			STATE _____			SERVICE CREW <u>...</u>		
AUTHORIZED BY _____				JOB TYPE: <u>CAPACITANCE</u>				
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED _____		
ARRIVED AT JOB _____						DATE <u>11/11/11</u> AM/PM _____		
START OPERATION _____						AM/PM _____		
FINISH OPERATION _____						AM/PM _____		
RELEASED _____						AM/PM _____		
MILES FROM STATION TO WELL _____								

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

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

ITEM REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>2500</u>	<u>...</u>	<u>EA</u>	<u>1</u>		<u>2500.00</u>
<u>5003</u>	<u>...</u>	<u>EA</u>	<u>1</u>		<u>172.50</u>
<u>8100</u>	<u>...</u>	<u>EA</u>	<u>1</u>		<u>2350.00</u>

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 MAY 02 2011
 KCC WICHITA

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	% TAX ON \$	
MATERIALS	% TAX ON \$	
TOTAL		<u>11,390.50</u>

...
DLS

SERVICE REPRESENTATIVE: ... THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: ...
 (WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

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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 00079 A

DATE 11-16-10 TICKET NO. 1718 00079

DATE OF JOB <u>11-16-10</u> DISTRICT <u>Pratt KS</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>A+12</u>		LEASE <u>...</u> WELL NO.:							
ADDRESS		COUNTY <u>Pratt</u> STATE <u>KS</u>							
CITY STATE		SERVICE CREW <u>...</u>							
AUTHORIZED BY		JOB TYPE: <u>...</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>3324</u>	<u>21</u>								
<u>1-10-14</u>	<u>31</u>								
<u>1-10-17</u>	<u>31</u>								
						ARRIVED AT JOB		AM	<u>6:30</u>
						START OPERATION		AM	
						FINISH OPERATION		AM	
						RELEASED		AM	
						MILES FROM STATION TO WELL			<u>60</u>

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).
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SIGNED: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
UP 105	114	16	20		2485.00
UP 115	...	16	20		2485.00
UP 125	12.9.000	16	60		2485.00
UP 111	...	16	1275		699.00
UP 113	...	16	1200		900.00
UP 115	...	16	345		1225.00
UP 125	...	16	1200		900.00
UP 126	...	16	1175		251.00
UP 113	...	16	...		100.00
UP 125	...	16	...		225.00
UP 145	...	16	...		320.00
UP 145	...	16	...		310.00
UP 125	...	16	...		105.00
UP 125	...	16	...		765.00
UP 125	...	16	...		940.00
UP 113	...	16	...		350.00
UP 125	...	16	720		1,152.00
UP 125	...	16	...		252.00
UP 125	...	16	1		2.00

RECEIVED
MAY 02 2011
KCC WICHITA

CHEMICAL / ACID DATA:			

SUB TOTAL		263
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE: [Signature]
FIELD SERVICE ORDER NO. _____
THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

PAGE	CUST NO	INVOICE DATE
1 of 1	1003241	11/10/2010
INVOICE NUMBER		
1718 - 90453632		

Pratt (620) 672-1201
 B ATLAS OPERATING LLC
 I 15603 KUYKENDAHL, STE 200
 L HOUSTON
 L TX US 77090
 T
 O ATTN:

J LEASE NAME Green 6
 O LOCATION
 B COUNTY Harper
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40251187	19842		Net - 30 days	12/10/2010

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 11/09/2010 to 11/09/2010</i>				
0040251187				
171802800A Cement-New Well Casing/Pi 11/09/2010 Surface				
60/40 POZ	200.00	EA	8.64	1,728.00 T
Cello-flake	50.00	EA	2.66	133.20 T
Calcium Chloride	516.00	EA	0.76	390.10 T
Wooden Cement Plug 8 5/8"	1.00	EA	115.20	115.20
Unit Mileage Charge-Pickups, Vans & Cars	60.00	HR	3.06	183.60
Heavy Equipment Mileage	120.00	MI	5.04	604.80
Proppant and Bulk Delivery Charges	516.00	MI	1.15	594.43
Blending & Mixing Service Charge	200.00	MI	1.01	201.60
Depth Charge; 0-500'	1.00	HR	720.00	720.00
Plug Container Utilization Charge	1.00	EA	180.00	180.00
Supervisor	1.00	HR	126.00	126.00

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PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	4,976.93
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	141.83
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	5,118.76
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



1024 NE Hwy. 51
P.O. Box 3613
Fruit, Kansas 67124
Phone 620-672-1201

1718 02800 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>11/9/10</u> DISTRICT <u>Wichita</u>		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 <u>FRITS OPERATOR</u>		LEASE <u>FRITS</u> WELL NO. <u>6</u>							
ADDRESS		COUNTY <u>Wichita</u> STATE <u>Ks</u>							
CITY STATE		SERVICE CREW <u>KC, TB, B&D</u>							
AUTHORIZED BY		JOB TYPE: <u>CHANGE SURFACE</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>17701</u>		<u>17757</u>	<u>1/2</u>				<u>11-9</u>		<u>11:15</u>
		<u>21416</u>	<u>1/2</u>			ARRIVED AT JOB		AM	PM
						START OPERATION		AM	PM
<u>19287</u>	<u>1/2</u>					FINISH OPERATION		AM	PM
<u>19242</u>	<u>1/2</u>					RELEASED		AM	PM
						MILES FROM STATION TO WELL			<u>6</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
<u>CE103</u>	<u>50/40 P02</u>		<u>200</u>	<u>1.20</u>	<u>240.00</u>
<u>CE102</u>	<u>CEMENT</u>		<u>50</u>	<u>3.00</u>	<u>150.00</u>
<u>CE109</u>	<u>6.00 5/8" STEEL ROPE</u>		<u>500</u>	<u>0.60</u>	<u>300.00</u>
<u>CE153</u>	<u>5/8" (600) P02</u>		<u>1</u>	<u>100.00</u>	<u>100.00</u>
<u>CE100</u>	<u>1.00 1/2" WIRE</u>		<u>100</u>	<u>2.00</u>	<u>200.00</u>
<u>CE101</u>	<u>1.00 1/2" WIRE</u>		<u>100</u>	<u>2.00</u>	<u>200.00</u>
<u>CE113</u>	<u>1.00 1/2" WIRE</u>		<u>500</u>	<u>0.60</u>	<u>300.00</u>
<u>CE100</u>	<u>1.00 1/2" WIRE</u>		<u>1</u>	<u>100.00</u>	<u>100.00</u>
<u>CE100</u>	<u>1.00 1/2" WIRE</u>		<u>1</u>	<u>100.00</u>	<u>100.00</u>
<u>CE104</u>	<u>1.00 1/2" WIRE</u>		<u>1</u>	<u>100.00</u>	<u>100.00</u>
<u>CE103</u>	<u>50/40 P02</u>		<u>1</u>	<u>100.00</u>	<u>100.00</u>

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CHEMICAL / ACID DATA:			

SUB TOTAL		
SERVICE & EQUIPMENT	% TAX ON \$	
MATERIALS	% TAX ON \$	
TOTAL		<u>DLS 44976.93</u>

SERVICE REPRESENTATIVE <u>K. BONDY</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>D. P.</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO.

BASIC

energy services, L.P.

TREATMENT REPORT

Customer ATLAS OPER.	Lease No.	Date
Lease GREEN	Well # C	11-29-10
Field Order # 2110	Station PRATT, KS	Casing 2 7/8
Type Job CEMENT SURFACE	Formation	Depth 268
		County WAGONER
		State KS
		Legal Description 37-3-2

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size 2 7/8	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
Depth 268	Depth	From	To	Pre Pad	Max		5 Min.
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative KECC	Station Manager SCOTT	Treater WENDY
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Service Units 19907	19889-19842	19859-21015
Driver Names KG	TUNNES	19270

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
0730					ON LOCATION
					RUN 268 8 1/2 C.S.L.
					BASIC OPER.
					WATER MANAGEMENT
0415	700		45	5	700 S. CEMENT PAD
					37-CC, 1/4" CELLULOSE
					STOP-RELEASE PUMP
	0		0	5	START ASP.
0445	700		16	5	PLUG DOWN
					C.D.C. 1/2 GAL CEMENT TO PAD
0530					JOB COMPLETE

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