

15-095-22203 0000 ORIGINAL

CONFIDENTIAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

RECEIVED

Form AGO-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

JUN 23 2010

6/16/10

OPERATOR: License # 6236 Name: MTM Petroleum, Inc. Address 1: 323 N Main Address 2: City: Kingman State: KS Zip: 67068 Contact Person: Nick Miller Phone: (620) 955-6014 CONTRACTOR: License # 5822 Name: Val Energy, Inc. Wellsite Geologist: Jerry A. Smith Purchaser:

API No. 15 - 095-22203 KCC WICHITA Spot Description: SW SW SE Sec. 14 Twp. 28 S. R. 8 East West 330 Feet from North South Line of Section 2,310 Feet from East West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE SW County: Kingman Lease Name: Simons Well #: 3 Field Name: Producing Formation: Mississippi Elevation: Ground: 1593 Kelly Bushing: 1602 Total Depth: 4784 Plug Back Total Depth: 4492.23 Amount of Surface Pipe Set and Cemented at: 223 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 cm.

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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 #: Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan AHI NS 6-2810 (Data must be collected from the Reserve Pit) Chloride content: ppm Fluid volume: bbls Dewatering method used: hauled offsite Location of fluid disposal if hauled offsite: Operator Name: Messenger Petroleum Lease Name: Arensdorf #1 License #: 4706 Quarter Sec. 14 Twp. 29 S. R. 9 East West County: Kingman Permit #: API#15-095-01293

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: Title: President Date: 6/16/2010

KCC Office Use ONLY Letter of Confidentiality Received Date: 6-16-10 Confidential Release Date: Wireline Log Received Geologist Report Received UIC Distribution ALT I II III Approved by: Date:

KCC

JUN 16 2010

Operator Name: MTM Petroleum, Inc. Lease Name: Simons Well #: 3
 Sec. 14 Twp. 28 S. R. 8 East West County: Kingman

CONFIDENTIAL

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Radiation Guard Bond	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <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>Heebner</td> <td>3165</td> <td>-1564</td> </tr> <tr> <td>Brown Lime</td> <td>3346</td> <td>-1745</td> </tr> <tr> <td>Lansing</td> <td>3360</td> <td>-1759</td> </tr> <tr> <td>Stark</td> <td>3694</td> <td>-2093</td> </tr> <tr> <td>Kansas City</td> <td>3800</td> <td>-3798</td> </tr> <tr> <td>Viola</td> <td>4386</td> <td>-2785</td> </tr> </table>	Name	Top	Datum	Heebner	3165	-1564	Brown Lime	3346	-1745	Lansing	3360	-1759	Stark	3694	-2093	Kansas City	3800	-3798	Viola	4386	-2785
Name	Top	Datum																				
Heebner	3165	-1564																				
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Stark	3694	-2093																				
Kansas City	3800	-3798																				
Viola	4386	-2785																				

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
Surface	12-1/2	8-5/8	24	223	60/40 poz	225	2% gel 1%cc
Production	7-7/8	4-1/2	10.5	4535	AA2	160	5#gil/sk

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate	3748-54	common	75	common
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD	3748.5-54.5	common	50	common
<input checked="" 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 <i>(Amount and Kind of Material Used)</i>	Depth
2	4037-47		
2	Bridge plug set @ 3800 perforated 3748-54	500gal 15%fe then squeezed off w/50 sks cmn & reperforated	3748-54
2	3748.5-54.5	500gal mca then squeezed off w/75 sks cmn	3748.5-54.5
	3800 drilled out bridge plug		
		100gal 15% w/900gal hsas	4037-47

TUBING RECORD:	Size: <u>2-3/8</u>	Set At: <u>4060</u>	Packer At: _____
Liner Run:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or ENHR. SI		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. SI	Gas Mcf SI	Water Bbls. SI	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ <div style="text-align: right; font-weight: bold; font-size: 1.2em;">RECEIVED</div>
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JUN 23 2010

KCC WICHITA

ALLIED CEMENTING CO., LLC. 036404

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

RECEIVED
KCC JUN 23 2010
KCC WICHITA JUN 16 2010

SERVICE POINT: Russell
Greg + Beaul US

DATE <u>4-10-10</u>	SEC. <u>14</u>	TWP. <u>28</u>	RANGE <u>8</u>	CONFIDENTIAL	ON LOCATION	JOB START <u>12:00 AM</u>	JOB FINISH <u>12:15 AM</u>
LEASE <u>S. mans</u>		WELL # <u>3</u>		LOCATION <u>Kingman 3 South</u>		COUNTY <u>Kingman</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)		<u>2 1/2 west N into</u>					

CONTRACTOR Uel Rig 3

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 223

CASING SIZE 8 3/4 DEPTH 223

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 13.25 BBLs

EQUIPMENT

OWNER MTM Petroleum

CEMENT

AMOUNT ORDERED 225 Class A

3%cc 2%Gel

COMMON	<u>225</u>	@	<u>13.45</u>	<u>3,076.25</u>
POZMIX		@		<u>83.20</u>
GEL	<u>4</u>	@	<u>20.80</u>	<u>83.20</u>
CHLORIDE	<u>8</u>	@	<u>58.20</u>	<u>465.60</u>
ASC		@	<u>20.00</u>	
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>225</u>	@	<u>2.40</u>	<u>540.00</u>
MILEAGE	<u>225 x 25 x 1.0</u>			<u>562.50</u>
				TOTAL <u>5,127.55</u>

PUMP TRUCK CEMENTER Wayne - D

398 HELPER Glen

BULK TRUCK

260 DRIVER Bob - R

BULK TRUCK

DRIVER

REMARKS:

pipe on Bottom Break circulation
with Rig shut down
Hook up to cement line
Mix 225 Class A 3%cc 2%Gel
Shut down Release Plug
Displace 13.25 BBLs
Cement did circulate
wash up Rig down

SERVICE

DEPTH OF JOB	<u>223</u>		
PUMP TRUCK CHARGE			<u>1018.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>25</u>	@	<u>7.00</u>
MANIFOLD		@	
		@	
		@	
TOTAL <u>1193.00</u>			

CHARGE TO: MTM Petroleum

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@		
<u>1 wooden plug</u>	@	<u>53.00</u>	<u>53.00</u>
	@		
	@		
TOTAL <u>53.00</u>			

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____

TOTAL CHARGES ~~5127.55~~

DISCOUNT ~~5127.55~~ IF PAID IN 30 DAYS

PRINTED NAME Daniel Olson

SIGNATURE *Daniel Olson*



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

RECEIVED

1718 1700 A

JUN 23 2010

DATE _____ TICKET NO. _____

DATE OF JOB 4-16-10 DISTRICT Pratt		<input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:						
CUSTOMER M.T.M. Parks		LEASE SIMONS 2 WELL NO.						
ADDRESS		COUNTY KANSAS STATE KS						
CITY STATE		SERVICE CREW Sullivan, Whiting, Elmer, So						
AUTHORIZED BY		JOB TYPE: PNW 4" Lateral						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED 4-16-10 DATE	AM	TIME
1997/12/20							PM	14
1996/11/14						ARRIVED AT JOB	AM	01:00
2927						START OPERATION	AM	0530
						FINISH OPERATION	AM	0615
						RELEASED 4-16-10	AM	0700
						MILES FROM STATION TO WELL		2

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
CF 102	All 2 cont	K	16		
CF 103	6x18 202 cont	K	2		
CF 105	6 bonnet	16	32		
CF 111	cont	16	32		
CF 115	SA Clock	16	114		
CF 129	72A 222	16	96		
CF 201	1.000	16	0		
CF 606	7.000 down Plug 4 1/2	72A	1		
CF 1021	2017 100 Shur	521	1		
CF 1623	Timberline	10	5		
CF 1700	LANE	17	1		
CF 204	h/L	10	2		
CF 155	5.000 Flurb	155	10		
CF 102	by meter	10	35		
CF 101	Handy 5.000	10	75		
CF 117	10.000 10.000	117	340		
CF 235	10.000 10.000 4.000 5.000	235	1		
CF 270	10.000 10.000	270	210		
CF 504	10.000 10.000	504	1		
CF 1003	10.000 10.000	1003	1		
SUB TOTAL					
CHEMICAL / ACID DATA:					
SERVICE & EQUIPMENT					%TAX ON \$
MATERIALS					%TAX ON \$
TOTAL					7

KCC
JUN 16 2010
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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.



BASICSM
 ENERGY SERVICES
 PRESSURE PUMPING & WIRELINE

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

RECEIVED
 JUN 23 2010

FIELD SERVICE TICKET
 1718 02177 A

KCC WICHITA DATE _____ TICKET NO. _____

DATE OF JOB		DISTRICT		NEW WELL <input type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER		LEASE								WELL NO.					
ADDRESS				COUNTY				STATE							
CITY				STATE				SERVICE CREW							
AUTHORIZED BY						JOB TYPE:									

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
						ARRIVED AT JOB				
						START OPERATION				
						FINISH OPERATION				
						RELEASED				
						MILES FROM STATION TO WELL				

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

SUB TOTAL **2,100.00**

CHEMICAL / ACID DATA:			

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

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



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

RECEIVED FIELD SERVICE TICKET
1718 02091 A
JUN 23 2010

14-285-8 WCC WICHITA

TICKET NO. _____

DATE OF JOB 6-9-10	DISTRICT Pratt, 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 MTM Petroleum, Inc.		LEASE Simons		WELL NO. 3			
ADDRESS		COUNTY Kingman		STATE Kansas			
CITY		STATE		SERVICE CREW C. Messick; K. Lesley; M. Mall			
AUTHORIZED BY		JOB TYPE: C.N.W. - Raise Cement (Squeeze)					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	
19,866	1					DATE	AM PM TIME
						6-9-10	3:00
						ARRIVED AT JOB	AM PM TIME
						6-9-10	10:00
27,463	1					START OPERATION	AM PM TIME
							10:45
						FINISH OPERATION	AM PM TIME
							11:45
19,832-21,010	1					RELEASED	AM PM TIME
						6-9-10	12:30
						MILES FROM STATION TO WELL	35

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
CP 100	Common Cement	sk	75		\$ 1,200 00
CC 109	Calcium Chloride	Lb	160		\$ 168 00
E 100	Pickup Mileage	mi	35		\$ 148 75
E 101	Heavy Equipment Mileage	mi	70		\$ 490 00
E 113	Bulk Delivery	tm	124		\$ 198 80
CE 204	Cement Pump: 3,000 Feet To 4,000 Feet	Job	1		\$ 2,160 00
CE 240	Blending and Mixing Service	sk	75		\$ 105 00
S003	Service Supervisor	Job	1		\$ 175 00
CE 500	Squeeze Manifold	Job	1		\$ 430 00

KCC
JUN 16 2010
CONFIDENTIAL

CHEMICAL / ACID DATA:			

SUB TOTAL		\$ 3,096 09
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		\$ 3,096 09

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