



KANSAS CORPORATION COMMISSION 1052862
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 # 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 # 33549
Name: Landmark Drilling, LLC
Wellsite Geologist: No Geologist on site
Purchaser: Plains/West Wichita Gas Gathering

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 #: _____

<u>07/16/2010</u>	<u>07/24/2010</u>	<u>08/15/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-077-21689-00-00
Spot Description: 175' EAST OF
E2 SE SW NW Sec. 31 Twp. 33 S. R. 8 East West
2310 Feet from North / South Line of Section
1165 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Harper
Lease Name: DIEL Well #: 1
Field Name: Hibbord North East
Producing Formation: Mississippi
Elevation: Ground: 1298 Kelly Bushing: 1308
Total Depth: 4694 Plug Back Total Depth: 4688
Amount of Surface Pipe Set and Cemented at: 264 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: 16000 ppm Fluid volume: 240 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: Hart Energies LLC
Lease Name: Guthrie SWD License #: 5822
Quarter NE Sec. 20 Twp. 34 S. R. 10 East West
County: Barber Permit #: D30383

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: Deanna Garrison Date: 07/01/2011



1052862

Operator Name: Griffin, Charles N. Lease Name: DIEL Well #: 1
 Sec. 31 Twp. 33 S. R. 8 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Kansas City	3950 2642
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Bottom Kansas City	4190 2882
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Cherokee	4371 3063
List All E. Logs Run:		Mississippi	4480 3172
Dual Induction Log Compensated Density Neutron Log Sonic Cement 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	264	Common	300	Salt, Gas Blok G
Production	7.875	5.5	15.5	4688	AA2	200	

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 <i>(Amount and Kind of Material Used)</i>	Depth
3	4490-4496	2000 gal 15% HCL Acid	

TUBING RECORD:	Size: <u>2.875</u>	Set At: <u>4500</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>08/16/2010</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls. <u>5</u>	Gas Mcf <u>10</u>	Water Bbls. <u>100</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 <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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: <u>4490-4496</u>
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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 02220 A

33-315-8W

DATE _____ TICKET NO. _____

DATE OF JOB: 7-25-10		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: Griffin Management				LEASE: Diel				WELL NO. 1	
ADDRESS:				COUNTY: Harper		STATE: Kansas			
CITY:				STATE:		SERVICE CREW: C. Messick; M. Mattal; E. Wright			
AUTHORIZED BY:				JOB TYPE: C.N.W. - Longstring					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
19,866	.75						7-24-10	AM	11:00
						ARRIVED AT JOB	7-25-10	AM	3:20
19,903-19,905	.75					START OPERATION		AM	8:45
						FINISH OPERATION		AM	9:30
19,832-21,010	.75					RELEASED	7-25-10	AM	10:00
						MILES FROM STATION TO WELL	65		

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 105	AA2 Cement	sh	200		\$ 3,400.00
CP 103	60/40 Poz Cement	sh	30		\$ 360.00
CC 111	Salt (Fine)	Lb	915		\$ 457.50
CC 112	Cement Friction Reducer	Lb	94		\$ 564.00
CC 115	Gas Blot	Lb	188		\$ 968.20
CC 201	Gilsonite	Lb	1,000		\$ 670.00
CF 607	Latch Down Plug and Baffle, 5 1/2"	ea	1		\$ 400.00
CF 1251	Auto Fill Float Shoe, 5 1/2"	ea	2		\$ 360.00
CF 1651	Turbolizer, 5 1/2"	ea	5		\$ 550.00
CF 1901	Basket, 5 1/2"	ea	1		\$ 290.00
C 704	CS-3L, FCL	Gal	5		\$ 175.00
CC 151	Mud Flush	Gal	500		\$ 430.00
F 100	Pickup Mileage	mi	65		\$ 276.25
F 101	Heavy Equipment Mileage	mi	130		\$ 910.00
F 113	Bulk Delivery	tm	696		\$ 1,112.80
CE 205	Cement Pump: 4,000 Feet To 5,000 Feet	Job	1		\$ 2,520.00
CE 240	Bleeding and Mixing Service	sh	230		\$ 322.00
CE 504	Plug Container	Job	1		\$ 250.00
S 003	Service Supervisor	Job	1		\$ 175.00

CHEMICAL / ACID DATA:			

SUB TOTAL		\$ 8,940.17
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	2LS
TOTAL		

SERVICE REPRESENTATIVE: <i>R M</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>R (Griffin)</i>
FIELD SERVICE ORDER NO. _____	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

BASIC

energy services, L.P.

TREATMENT REPORT

Customer: Griffin Management Lease No. _____ Date: 7-25-10
 Lease: Diel Well # 1
 Field Order # 2220 Station Pratt, Kansas Casing 5 1/2 Depth 15.5 County Harper State Kansas
 Type Job C.N.W. - Longstring Formation _____ Legal Description 33-315-8W

PIPE DATA		PERFORATING DATA		CEMENT USED		TREATMENT RESUME		
Casing Size <u>5 1/2</u>	Tubing Size <u>5 1/8</u>	Shots/Ft	<u>200</u>	AA-2 with	<u>5</u>	RATE	PRESS	ISIP
Depth <u>493</u>	Depth	From	To	<u>18</u>	<u>6</u>	<u>5</u>	<u>108</u>	<u>5</u>
Volume <u>7</u>	Volume	From	To	<u>15.3</u>	<u>6</u>	<u>5.6</u>	<u>76</u>	<u>1.36</u>
Max Press <u>1750</u>	Max Press	From	To	<u>30</u>	<u>sacks</u>	<u>60/40</u>	<u>Poz</u>	<u>to</u>
Well Connection <u>Plug</u>	Annulus Vol.	From	To					
Plug Depth <u>to</u>	Packer Depth	From	To	Flush <u>111.4</u>	<u>Bbl.</u>	<u>28</u>	<u>HCL</u>	Bas Volume

Customer Representative: J.R. Griffin Station Manager: David Scott Treater: Clarence R. Messick

Service Units	<u>19,866</u>	<u>19,903</u>	<u>19,905</u>	<u>19,832</u>	<u>21,010</u>				
Driver Names	<u>Messick</u>	<u>Mattal</u>	<u>Wright</u>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<u>8:20</u>					<u>Trucks on location and hold safety meeting.</u>
<u>8:40</u>					<u>Landmark Drilling start to run Auto fill Float Shoe, Shoe Joint with Latch Down Baffle screwed in to collar and a total of 115 Joints new 15.5 Lb./Ft. 5 1/2 casing. A Basket was installed on top of Shoe Joint. Turbulizers were installed on collars # 1, 2, 3, 4, and # 5.</u>
<u>8:05</u>					<u>Casing in well. Circulate for 35 minutes.</u>
<u>8:45</u>	<u>200</u>			<u>6</u>	<u>Start Fresh water Pre-Flush.</u>
			<u>20</u>	<u>6</u>	<u>Start Mud Flush.</u>
			<u>32</u>	<u>5</u>	<u>Start Fresh water spacer.</u>
<u>8:52</u>	<u>300</u>		<u>37</u>	<u>5</u>	<u>Start mixing 200 sacks AA-2 cement.</u>
	<u>-0-</u>		<u>85</u>		<u>Stop pumping. Shut in well. Wash pump and lines. Release latch Down Plug. Open Well.</u>
<u>9:06</u>	<u>100</u>			<u>6.5</u>	<u>Start 28 HCL Displacement.</u>
				<u>5</u>	<u>Start to lift cement.</u>
<u>9:24</u>	<u>900</u>		<u>111.4</u>		<u>Plug down.</u>
	<u>1750</u>				<u>Pressure up.</u>
	<u>-0-</u>				<u>Release Pressure. Float Shoe held.</u>
	<u>-0-</u>				<u>Plug Rat Hole.</u>
<u>9:35</u>	<u>-0-</u>				<u>Wash up pump truck.</u>
<u>10:00</u>					<u>Job Complete.</u>
					<u>Thank You.</u>
					<u>Clarence, Mike, Eric</u>

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

Customer <i>Basic Energy Services</i>	Lease No.	Date <i>7-17-11</i>	
Lease <i>1012</i>	Well # <i>1</i>		
Field Order # <i>2111</i>	Station <i>P. 1-4</i>	Casing <i>2 7/8</i>	Depth <i>201</i>
Type Job <i>C.N.W. - Surf...</i>		County <i>Hemp</i>	State <i>KS</i>
Formation		Legal Description <i>37-31-8</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		-Acid-	RATE	PRESS	ISIP	
Depth <i>201</i>	Depth	From	To <i>32</i>	Pre Pad <i>1.5</i>	Max		5 Min.	
Volume <i>7</i>	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 <i>1.5</i>	Gas Volume		Total Load	

Customer Representative	Station Manager <i>Dr. Scott</i>	Treater <i>Steve Wilcox</i>
Service Units <i>37023 27465 19831 17865</i>		
Driver Names <i>1012 1012 1012</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>6:00</i>					<i>Well - Safety Meeting</i>
					<i>Run 6.5" 3 1/2" 5' down</i>
					<i>Can't see bottom</i>
					<i>Run 6.5" 3 1/2" 5' down</i>
<i>7:15</i>			<i>3</i>	<i>4.5</i>	<i>H2O 1100</i>
<i>7:16</i>			<i>38</i>	<i>5</i>	<i>Max 175 psi - 18.6"/min</i>
					<i>Stop Down - 10 min - plug</i>
<i>7:20</i>			<i>0</i>	<i>11</i>	<i>Stop Down - 10 min - 1100</i>
<i>7:25</i>			<i>10</i>	<i>11</i>	<i>Can't see bottom</i>
<i>10:00</i>			<i>15</i>	<i>4</i>	<i>plug Down</i>
					<i>Can't see bottom</i>
					<i>Can't see bottom</i>
					<i>Tab Complete</i>
					<i>Thank you</i>