



KANSAS CORPORATION COMMISSION 1069534
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 # 6039
Name: L. D. Drilling, Inc.
Address 1: 7 SW 26TH AVE
Address 2: _____
City: GREAT BEND State: KS Zip: 67530 + 6525
Contact Person: L. D. DAVIS
Phone: (620) 793-3051
CONTRACTOR: License # 6039
Name: L. D. Drilling, Inc.
Wellsite Geologist: NA
Purchaser: M V PURCHASING

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: PICKREL DRILLING CO & BRUCE ANDERSON
Well Name: #1 HERBEL

Original Comp. Date: 12/03/1985 Original Total Depth: 4730

- 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 #: _____

10/26/2011 10/29/2011 11/09/2011
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-193-20380-00-01

Spot Description: _____

NE SW NE NW Sec. 27 Twp. 9 S. R. 33 East West
970 Feet from North / South Line of Section
1700 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Thomas

Lease Name: HERBEL OWWO Well #: 1-27

Field Name: WILDCAT

Producing Formation: PAWNEE ZONE

Elevation: Ground: 3151 Kelly Bushing: 3152

Total Depth: 4730 Plug Back Total Depth: 4696

Amount of Surface Pipe Set and Cemented at: 390 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 2695 Feet

If Alternate II completion, cement circulated from: 2695

feet depth to: 0 w/ 175 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 #: _____

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 Garriss Date: 12/05/2011



1069534

Operator Name: L. D. Drilling, Inc. Lease Name: HERBEL OWWO Well #: 1-27
 Sec. 27 Twp. 9 S. R. 33 East West County: Thomas

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum NA
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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 - OLD	12.25	8.625	24	390	60/40 POZMIX	200	6%GEL, 3%CC
PRODUCTION	7.875	4.5	11.6	4728	COMMON	175	2%GEL, 5%CAL-SET
PRODUCTION-CONT	7.875	4.5	11.6	4728	A-CONN	530	3%CC, 1/4#CF

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
4	4499 - 4505'	1000 Gal 20% MCA Acid	

TUBING RECORD: Size: <u>2.375</u> Set At: <u>4693</u> Packer At:		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumed Production, SWD or ENHR. <u>11/17/2011</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.	Gas Mcf	Water Bbls.	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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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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 04952 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>10/29/11</u> DISTRICT <u>PRATT, KS.</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>LD DRILLING</u>	LEASE <u>HARBEL OWWO</u> WELL NO. <u>1-27</u>								
ADDRESS	COUNTY <u>THOMAS</u> STATE <u>KS.</u>								
CITY STATE	SERVICE CREW <u>KC BRAD, JEFF, MAC GRAW</u>								
AUTHORIZED BY	JOB TYPE <u>CCSPW - LONGSTRING</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>19867</u>		<u>19826</u>	<u>7</u>				<u>10-28</u>	PM	<u>8:00</u>
		<u>19860</u>	<u>7</u>			ARRIVED AT JOB	<u>10-29</u>	AM	<u>12:30</u>
<u>19903</u>	<u>7</u>					START OPERATION		AM	<u>15:00</u>
<u>19905</u>	<u>7</u>	<u>19832</u>	<u>3</u>			FINISH OPERATION		AM	<u>18:00</u>
		<u>21010</u>	<u>3</u>			RELEASED		AM	<u>19:00</u>
						MILES FROM STATION TO WELL			<u>220</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
CP100	COMMON CEMENT	SK.	175		2800.00
CP101	A-COM CEMENT	SK.	500		9000.00
CP101	A-COM CEMENT	SK.	30		540.00
CC102	CELLULASE	lb.	133		492.10
CC109	SODIUM CHLORIDE	lb.	1497		1571.85
CC113	CHAL-SEL	lb.	825		618.75
CC200	CEMENT GEL	lb.	330		87.50
CF400	4 1/2 TWO STAGE CEMENT PLUG	EA	1		4500.00
CF600	4 1/2 LATCH DOWN PLUG	EA	1		770.00
CF1250	4 1/2 WFL FLOAT SHOCK	EA	1		330.00
CF1650	4 1/2 TURBOBITTER	EA	8		680.00
CF1900	4 1/2 BASKET	EA	1		270.00
CC151	MUD FLUSH	gal.	1000		860.00

SUB TOTAL
DLS

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE <u>K. CONDLEY</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Phil White</u>
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



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 04953 A~~
CONTINUATION

DATE _____ TICKET NO. 04952A

DATE OF JOB <u>10/29/11</u> DISTRICT <u>PIAN, KS</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>LD DRILLING</u>	LEASE <u>HEARREL OUVWU</u> WELL NO. <u>1-27</u>									
ADDRESS	COUNTY <u>THOMAS</u> STATE <u>KS.</u>									
CITY STATE	SERVICE CREW <u>KC, BRAD, JEFF, MICHAEL</u>									
AUTHORIZED BY	JOB TYPE <u>PCSW - LOW STRENGTH</u>									
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.
E100	PERKUP MELEAGE	mik	100		425.00
E101	TRUCK MELEAGE	mik	300		2100.00
E113	BULK DELIVERY	TW	3320		5312.00
CE205	DEPTH CHARGE - 4001-5000	EA	1		2520.00
CE240	BLENDING CHARGE	SK	705		987.00
CE504	PUMP CONTAINER	EA	1		250.00
S003	SERVICE SUPERVISOR	EA	1		175.00
CE203	DEPTH CHARGE 2001-3000	EA	1		1800.00

SUB TOTAL DL5 28,467.02

CHEMICAL / ACID DATA:				

SERVICE & EQUIPMENT	%TAX ON S	
MATERIALS	%TAX ON S	
TOTAL		

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

FIELD SERVICE ORDER NO.

BASIC

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energy services, L.P.

TREATMENT REPORT

Customer LB DREWING	Lease No.	Date 10-29-11
Lease HARBEL OUNWO	Well # 1-27	
Field Order # 4932	Station PRATT, Ks.	Casing 4 1/2
		Depth 4728
Type Job COSFW - LOWSTRENG	Formation TD-4730	County THOMAS
		State KS.
		Legal Description 27-9-33

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
4 1/2				DV-2695			
Depth 4728	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 4774	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative LD	Station Manager SCOTTY	Treater GORDUEY
Service Units 19907	19903-19905	19826-19860
Driver Names KG	BRAD	MAC GRAW
		JEFF

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1230					ON LOCATION
1200					RUN 4727' 4 1/2" 11.6" CSC 113 JT.
					FLOW SHOES LATCH BAFFLE IN
					14' SIDE JT. AT 4714'
					CENT. - 1-3-5-7-9-11-13-47
					BASKET - BOTTOM OF #48
					DU TOOL ON TOP OF JT #48
					AT 2695'
					ANHYDRITE - 2690' - 2718'
1400					TAP BOTTOM - DROP BALL -
					CIRCULATE 1 HOUR
					BOTTOM STAGE:
1500	400		24	6	PUMP 24' 66l. MUD FLUSH
	400		6	6	PUMP 6' 66l. H₂O
	300		42	6	PUMP 175 SK COMMON #
					2% GEL, 5% CMC SET AT 15'
					STOP - WASH LINE - DROP PLUG
	0		0	6	START DISP. W/ H₂O
	200		33	4	START MUD DISP.
	300		48	4	CEMENT LEFT PSE
1545	1500		73	4	PLUG DOWN - HELD

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energy services, L.P.

TREATMENT REPORT

Customer: LD DRILLING	Lease No.	Date:
Lease: HARREL OWEN	Well #: 1-27	10-29-11
Field Order #: 4952	Station: PRATT, KS	Casing: 4 1/2
Type Job: OCSPW - LOW STRONG	Formation: TD-4730	Legal Description: 27-9-33
Depth: 4729	County: T. THOMAS	State: KS

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	DU-269#	RATE	PRESS	ISIP
Depth	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	Station Manager	Treater
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Service Units								
Driver Names								

Time	Casing Pressure	Tubing Pressure	Bbbls. Pumped	Rate	Service Log
					DROP DU OPEN PLUG
1600	1200				OPEN DU TOOL - CIRCULATE 1 HOUR
					TOP STAGE :
1700	300		228	6	PUMP 520 SK A-COW CEMENT 3% CC, 1/4" CELLFILL AT 12 FT
					STOP WORK & DONE - DROP PLUG
	0		0	6	START ASP
1800	7000		41.7	3	PLUG DOWN - DU CLOSED
					CIRCULATE 40 bbl. CEMENT TO SET
					PLUG RATHOLE - 30 SK A-COW
1900					JOB COMPLETE - HEVD

Taylor Printing, Inc. 620-672-3656