



KANSAS CORPORATION COMMISSION 1065895  
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 # 34434  
Name: Edison Operating Company LLC  
Address 1: 9427 E. Cross Creek  
Address 2: \_\_\_\_\_  
City: WICHITA State: KS Zip: 67206 + \_\_\_\_\_  
Contact Person: David Withrow  
Phone: (316) 613-1544  
CONTRACTOR: License # 5929  
Name: Duke Drilling Co., Inc.  
Wellsite Geologist: Mac Armstrong  
Purchaser: \_\_\_\_\_

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 #: \_\_\_\_\_  
09/15/2011    09/23/2011    10/05/2011  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-175-22192-00-00  
Spot Description: NW SW/4 NW SE  
\_\_\_\_\_ NW SE Sec. 30 Twp. 34 S. R. 32  East  West  
1980 Feet from  North /  South Line of Section  
1980 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Seward  
Lease Name: Box Well #: 1-30  
Field Name: \_\_\_\_\_  
Producing Formation: Mississippian  
Elevation: Ground: 2769 Kelly Bushing: 2781  
Total Depth: 6500 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 1611 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: 2100 ppm Fluid volume: 4800 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**

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: 01/10/2012



1065895

Operator Name: Edison Operating Company LLC Lease Name: Box Well #: 1-30  
 Sec. 30 Twp. 34 S. R. 32  East  West County: Seward

**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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no. Submit Copy)</i>  List All E. Logs Run: <b>Attached</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Heebner</td> <td>4335</td> <td>-1557</td> </tr> <tr> <td>Lansing</td> <td>4496</td> <td>-1718</td> </tr> <tr> <td>Morrow Shale</td> <td>5805</td> <td>-3027</td> </tr> <tr> <td>Chester</td> <td>6048</td> <td>-3270</td> </tr> <tr> <td>St. Gen</td> <td>6410</td> <td>-3632</td> </tr> </tbody> </table>	Name	Top	Datum	Heebner	4335	-1557	Lansing	4496	-1718	Morrow Shale	5805	-3027	Chester	6048	-3270	St. Gen	6410	-3632
Name	Top	Datum																	
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Lansing	4496	-1718																	
Morrow Shale	5805	-3027																	
Chester	6048	-3270																	
St. Gen	6410	-3632																	

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 Casing	12.2500	8.6250	24	1611	AA	520	
Production Casing	7.8750	4.5000	10.5	6488	AA	140	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" 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
2		Acid 3,000 gals	6014

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. _____		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.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity
		0	

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: <u>5986'-6014'</u>
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Form	ACO1 - Well Completion
Operator	Edison Operating Company LLC
Well Name	Box 1-30
Doc ID	1065895

All Electric Logs Run

DIL
CDNL
Micro
Sonic



PAGE	CUST NO	INVOICE DATE
1 of 1	1007020	09/21/2011
INVOICE NUMBER		
1717 - 90704935		

**Liberal** (620) 624-2277  
 B EDISON OPERATING COMPANY LLC  
 I 1223 NORTH ROCK ROAD BLDG I-100  
 L WICHITA  
 L KS US 67206  
 T  
 O ATTN: DAVID WITHROW

J LEASE NAME Box #1-30  
 O LOCATION  
 B COUNTY Seward  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 T JOB CONTACT  
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40372060	30463		Net - 30 days	10/21/2011
For Service Dates: 09/16/2011 to 09/16/2011 0040372060 171702113A Cement-New Well Casing/Pi 09/16/2011 8 5/8" Surface A-Con Blend Premium Plus Cement Premium Cement Calcium Chloride Celloflake C-51 Guide Shoe - Regular - 8 5/8" Insert Float Valve - 8 5/8" Basket - 8 5/8" Top Rubber Cement Plug - 8 5/8" Heavy Equipment Mileage Blending & Mixing Service Charge Proppant and Bulk Delivery Charge Depth Charge; 1001' - 2000' Plug Container Utilization Charge Pickup Mileage Service Supervisor				
	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
			9232 - HWC 5 1/2" Pipe 8 5/8" SLG Casing	
	370.00	EA	18.60	5,203.69 T
	150.00	EA	16.30	1,848.74 T
	60.00	EA	16.00	725.89 T
	1,326.00	EA	1.05	1,052.76 T
	130.00	EA	3.70	363.70 T
	70.00	EA	25.00	1,323.23 T
	1.00	EA	380.00	287.33
	1.00	EA	280.00	211.72
	1.00	EA	315.00	238.18
	1.00	EA	225.00	170.13
	75.00	MI	7.00	396.97
	580.00	MI	1.40	613.98
	683.00	MI	1.60	826.30
	1.00	EA	1,500.00	1,134.20
	1.00	EA	250.00	189.03
	25.00	MI	4.25	80.34
	1.00	HR	175.00	132.32

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	14,798.51
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	767.81
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	15,566.32
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



PAGE	CUST NO	INVOICE DATE
1 of 1	1007020	09/21/2011
INVOICE NUMBER		
1717 - 90705075		

**Liberal** (620) 624-2277  
 B EDISON OPERATING COMPANY LLC  
 I 1223 NORTH ROCK ROAD BLDG I-100  
 L WICHITA  
 L KS US 67206  
 T  
 O ATTN: DAVID WITHROW

J LEASE NAME Box #1-30  
 O LOCATION  
 B COUNTY Seward  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 T JOB CONTACT  
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40372316	27462		Net - 30 days	10/21/2011

**For Service Dates: 09/17/2011 to 09/17/2011**

0040372316

171701935A Cement-New Well Casing/Pi 09/17/2011  
8 5/8" Surface

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
Premium Plus Cement	100.00	EA	16.30	1,222.50 T
Calcium Chloride	282.00	EA	1.05	222.08 T
Heavy Equipment Mileage	50.00	MI	7.00	262.50
Blending & Mixing Service Charge	300.00	MI	1.40	315.00
Proppant and Bulk Delivery Charge	353.00	MI	1.60	423.60
Depth Charge; 0-500'	1.00	EA	1,000.00	750.00
Pickup Mileage	25.00	MI	4.25	79.89
Service Supervisor	1.00	HR	175.00	131.25

*9232-Huc 5/8" Pipe  
8 5/8" Surface*

*Valon*

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	3,406.62
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	109.07
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	3,515.69
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



PAGE	CUST NO	INVOICE DATE
1 of 1	1007020	09/26/2011
INVOICE NUMBER		
1717 - 90708862		

**Liberal** (620) 624-2277  
**B** EDISON OPERATING COMPANY LLC  
**I** 1223 NORTH ROCK ROAD BLDG I-100  
**L** WICHITA  
**L** KS US 67206  
**T**  
**O** ATTN: DAVID WITHROW

**J** LEASE NAME Box #1-30  
**O** LOCATION  
**B** COUNTY Seward  
**S** STATE KS  
**I** JOB DESCRIPTION Cement-New Well Casing/Pi  
**T**  
**E** JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40374436	38111		Net - 30 days	10/26/2011

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 09/25/2011 to 09/25/2011</i>				
0040374436				
171702155A Cement-New Well Casing/Pi 09/25/2011				
4 1/2" Longstring				
<i>AA2 Cement</i>				
AA2 Cement	140.00	EA	18.20	1,938.53 T
Premium/Common	50.00	EA	16.00	608.64 T
Gypsum	660.00	EA	0.75	376.60 T
Salt	777.00	EA	0.50	295.57 T
C-15	80.00	EA	12.50	760.80 T
C-42P	33.00	EA	8.00	200.85 T
Gilsonite	700.00	EA	0.67	356.82 T
Auto Fill Float Shoe - 4 1/2"	1.00	EA	330.00	251.07
Latch Down Plug & Baffle - 4 1/2"	1.00	EA	370.00	281.50
Basket - 4 1/2"	1.00	EA	270.00	205.42
Centralizer - 4 1/2"	7.00	EA	60.00	319.54
Super Flush II	500.00	EA	1.53	582.02 T
Heavy Equipment Mileage	50.00	MI	7.00	266.28
Blending & Mixing Service Charge	190.00	MI	1.40	202.37
Proppant and Bulk Delivery Charge	224.00	MI	1.60	272.67
Depth Charge; 6001' - 7000'	1.00	EA	3,240.00	2,465.00
Plug Container Utilization Charge	1.00	EA	250.00	190.20
Pickup Mileage	25.00	MI	4.25	80.84
Service Supervisor	1.00	HR	175.00	133.14

~~4 1/2" Longstring Pipe~~  
 9245 - Run Cement Prod Casing  
 4 1/2" longstring

Va/29

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	9,787.86
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	386.55
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	10,174.41
DALLAS, TX 75284-1903	MIDLAND, TX 79702		