

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

12/10/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 8061
Name: Oil Producers Inc. of Kansas
Address: 1710 Waterfront Parkway
City/State/Zip: Wichita, KS 67206
Purchaser: _____
Operator Contact Person: Lori Zehr
Phone: (316) 681-0231
Contractor: Name: Duke Drilling Co., Inc.
License: 5929

Wellsite Geologist: _____
Designate Type of Completion:
____ New Well ____ Re-Entry Workover
____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
 Gas ____ ENHR SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: Petroleum, Inc.
Well Name: Warden #3
Original Comp. Date: 10/29/1969 Original Total Depth: 6420
____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
____ Other (SWD or Enhr.?) Docket No. _____

8/20/2009 8/22/2009 9/09/2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 175-20080-00-01
County: Seward
____ nw- ne Sec. 25 Twp. 34 S. R. 33 East West
4620 feet from (S) / N (circle one) Line of Section
1980 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Warden Well #: #3 OWWO
Field Name: Evalyn-Condit NE

Producing Formation: Mississippian
Elevation: Ground: 2796 Kelly Bushing: 2808
Total Depth: 6305 Plug Back Total Depth: 6246
Amount of Surface Pipe Set and Cemented at 1569 already set 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 WD NS 12-2309
(Data must be collected from the Reserve Pit)
Chloride content 35,840 ppm Fluid volume 320 bbls
Dewatering method used Haul to SWD
Location of fluid disposal if hauled offsite:
Operator Name: See Note #1
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. S. R. _____ East West
County: _____ Docket No.: _____

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.

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: [Signature]
Title: President Date: 12/4/2009
Subscribed and sworn to before me this 4th day of December, 2009.
Notary Public: Lori A Zehr
Date Commission Expires: May 5, 2010

LORIA ZEHR
Notary Public - State of Kansas
My Appt. Expires 5/5/10

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
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Operator Name: Oil Producers Inc. of Kansas Lease Name: Warden Well #: #3 OWWO
 Sec. 25 Twp. 34 S. R. 33 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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: Dual Receiver Cement Bond Log	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:20%;">Log Name</th> <th style="width:50%;">Formation (Top), Depth and Datum</th> <th style="width:30%;">Sample Datum</th> </tr> <tr> <td>Washdown-no tops</td> <td></td> <td></td> </tr> </table>	Log Name	Formation (Top), Depth and Datum	Sample Datum	Washdown-no tops		
Log Name	Formation (Top), Depth and Datum	Sample Datum					
Washdown-no tops							

CASING RECORD							
			New	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
Production		4 1/2	10.5 & 11.6	6300	AA-2	150	

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 (Amount and Kind of Material Used)	Depth
2	Chester	3000 gals, w/ 15%FE acid	6123-53

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TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	<input checked="" type="checkbox"/> No
		2 3/8	6061	N/A			
Date of First, Resumed Production, SWD or Enhr.			Producing Method				
waiting pipeline			<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity		

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Sumit ACO-18.) _____ _____
 Other (Specify) _____

Attachment-Warden #3 OWWO

Note #1:

Operator Name: West Sunset Disposal

Lease Name: Hatcher #1-12 License No.: 32462

Quarter: NW Sec.: 12 Twp: 33S R: 33W

County: Seward Docket No.: D-30331

Operator Name: West Sunset Disposal

Lease Name: Simonson #25-1 License No.: 32462

Quarter: SW Sec.: 25 Twp: 33S R: 31W

County: Seward Docket No.: D-27929

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PAGE	CUST NO	INVOICE DATE
1 of 1	1002993	08/24/2009
INVOICE NUMBER		
1717 - 90107815		

Liberal (620) 624-2277
B OIL PRODUCER'S INC OF KANSAS
I 1710 WATERFRONT PKWY
L WICHITA
L KS US 67206
T
O ATTN:

J LEASE NAME Warden #3
O LOCATION
B COUNTY Seward
S STATE KS
I JOB DESCRIPTION Cement-Casing Seat-Prod W
T JOB CONTACT
E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40080381	30464		Net - 30 days	09/23/2009
For Service Dates: 08/22/2009 to 08/22/2009				
0040080381				
171700209A Cement-Casing Seat-Prod W 08/22/2009				
4 1/2" Longstring				
AA2 Cement	150.00	EA	9.10	1,365.00 T
Premium/Common Cement	50.00	EA	8.00	400.00 T
FLA-115	85.00	EA	7.50	637.50 T
Salt (fine)	776.00	EA	0.25	194.00 T
CAF 38 Defoamer	36.00	EA	3.50	126.00 T
Gilsonite	750.00	EA	0.34	251.25 T
Guide Shoe - Regular - 4 1/2"	1.00	EA	112.50	112.50 T
Insert Float Valve - 4 1/2"	1.00	EA	100.00	100.00 T
Centralizer - 4 1/2"	5.00	EA	55.00	275.00 T
Basket - 4 1/2"	2.00	EA	135.00	270.00 T
Super Flush II	500.00	EA	0.77	382.50 T
Top Rubber Cement Plug - 4 1/2"	1.00	EA	40.00	40.00 T
Heavy Equipment Mileage	20.00	MI	3.50	70.00 T
Blending & Mixing Service Charge	200.00	MI	0.70	140.00 T
Proppant and Bulk Delivery Charge	94.00	MI	0.80	75.20 T
Depth Charge; 6001' - 7000'	1.00	EA	1,620.00	1,620.00 T
Service Supervisor Charge	1.00	HR	87.50	87.50 T
Car, Pickup or Van Mileage	10.00	MI	2.13	21.25 T
Plug Container Charge	1.00	EA	125.00	125.00 T

Cement For 4 1/2" casing.
Idc.
M.
902-34

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PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	6,292.70
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	412.17
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	6,704.87
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.
P.O. Box 129
Liberal, Kansas 67905
Phone 620-624-2277

FIELD SERVICE TICKET
1717 00209 A

DATE _____ TICKET NO. _____

DATE OF JOB 8-22-9 DISTRICT 1717		NEW WELL <input type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> <input checked="" type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:							
CUSTOMER Oil Producers		LEASE Warden WELL NO. 3							
ADDRESS		COUNTY Seward STATE KS							
CITY STATE		SERVICE CREW Jason A, Ronnie C							
AUTHORIZED BY Jerry Bennett IRB		JOB TYPE: Long String 241							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM-PM	TIME
304164	7						8-22-9		1245
19919	2					ARRIVED AT JOB	8-22-9		135
14355	7					START OPERATION	8-22-9		1405
14284	2					FINISH OPERATION	8-22-9		715
						RELEASED	8-22-9		745
						MILES FROM STATION TO WELL	10		

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: Bob Kasper
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL105	AAR Cmt	SK	150		2730 00
CL100	Premium - Common	SK	50		800 00
CC124	FLA-115	lb	85		1275 00
CC111	SOH	lb	776		388 00
CC107	CAF 38 Defoamer	lb	36		252 00
CC201	Gilsonite	lb	750		502 50
CF250	Guide Shoe	EA	1		225 00
CF1450	Flapper Insert Float Valve	EA	1		200 00
CF1770	Centralizer 4 1/2	EA	5		550 00
CF1900	Basket 4 1/2	EA	2		540 00
CC155	Super Flush II	gal	500		765 00
CF102	Rubber Plug	EA	1		80 00
E101	Heavy Equipment Mileage	mi	20		140 00
CE240	Mixing Service Charge	SK	200		280 00
E113	Bulk Delivery Charge	tm	94		150 40
CE207	Depth Charge	4hrs	1		3240 00
E100	Pickup Mileage	mi	10		42 50
5003	Service Supervisor	EA	1		175 00
CE504	Plus Containers Charge	job	1		250 00
SUB TOTAL					

CHEMICAL / ACID DATA:	
Super Flush II	500 gal

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		6292 70

SERVICE REPRESENTATIVE: Smith Chace THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Bob Kasper
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

Customer <i>Oil Producers</i>	Lease No.	Date <i>8-22-09</i>
Lease <i>Wardan</i>	Well # <i>3</i>	
Field Order # <i>171700209A</i>	Station <i>Liberal</i>	Casing <i>4 1/2</i> Depth <i>6300</i> County <i>Sevier</i> State <i>KS</i>
Type Job <i>Long String Z41</i>	Formation	Legal Description <i>25-34-33</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Actd	RATE	PRESS	ISIP	
<i>8 1/2</i>				<i>150 SK AAR</i>				
Depth	Depth	From	To	Pre-Pad	Max		5 Min.	
<i>6300</i>				<i>1.441 FT³ - SK</i>				
Volume	Volume	From	To	Pad	Min		10 Min.	
<i>98</i>				<i>6.2 Gals SK</i>				
Max Press	Max Press	From	To	Frac	Avg		15 Min.	
<i>1500</i>				<i>50 SX Neat</i>				
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
				<i>1.18 FT³ - SK</i>				
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load	
				<i>5.20 Gals SK</i>				

Customer Representative <i>1500 Casper</i>	Station Manager <i>Serry Bennett</i>	Treater <i>J. Small / Chariz</i>
Service Units <i>19820 30461 19919 11355 14284</i>		
Driver Names <i>J. Chariz Jason A Pommal C.</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>135</i>					<i>Arrive On Location</i>
<i>145</i>					<i>Safety Meeting - Rig Up</i>
<i>605 - 2000</i>			<i>.5</i>	<i>.5</i>	<i>Pressure Test</i>
<i>610</i>	<i>500</i>		<i>12</i>	<i>4.0</i>	<i>Pump Start Flush 11 Spacer H2O Flush H2O</i>
<i>620</i>	<i>350</i>		<i>39</i>	<i>4.3</i>	<i>Pump Cont @ 15.0 FT'S</i>
<i>635</i>	<i>0</i>		<i>0</i>	<i>0</i>	<i>Displace - Wash up - Drop Plug</i>
<i>640</i>	<i>650</i>		<i>87</i>	<i>4.5</i>	<i>Displace</i>
<i>710</i>	<i>1100</i>		<i>10</i>	<i>2.0</i>	<i>Slow Down</i>
<i>715</i>	<i>1500</i>		<i>.5</i>	<i>1.5</i>	<i>Load Plug - Float Held</i>
<i>745</i>					<i>Job Complete</i>
					<i>Plug out of Abuse Hole</i>

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