



KANSAS CORPORATION COMMISSION 1074021
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 # 33036
Name: Strata Exploration, Inc.
Address 1: PO BOX 401
Address 2: _____
City: FAIRFIELD State: IL Zip: 62837 + 0401
Contact Person: John R Kinney
Phone: (618) 842-2610
CONTRACTOR: License # 5142
Name: Sterling Drilling Company
Wellsite Geologist: Jon Christensen
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.): lost hole

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>08/23/2011</u>	<u>08/24/2011</u>	<u>08/24/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-097-21698-00-00
Spot Description: _____
NE SW SE SE Sec. 32 Twp. 27 S. R. 18 East West
600 Feet from North / South Line of Section
700 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Kiowa
Lease Name: Naumann Well #: 1-32
Field Name: _____
Producing Formation: N/A
Elevation: Ground: 2211 Kelly Bushing: 2220
Total Depth: 493 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 481 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: 0 ppm Fluid volume: 0 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 Gantner Date: 02/14/2012



1074021

Operator Name: Strata Exploration, Inc. Lease Name: Naumann Well #: 1-32
 Sec. 32 Twp. 27 S. R. 18 East West County: Kiowa

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 N/A
---	--

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	481	See ticket	650	See ticket

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
— Perforate				
— Protect Casing				
— Plug Back TD	-			
— 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

TUBING RECORD: Size: Set At: Packer At: Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. Producing Method:
 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	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 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: _____ _____
--	--	---

PREPAY

PAGE 1 of 1	CUST NO 1004072	INVOICE DATE 09/13/2011
INVOICE NUMBER 1718 - 90696962		



BASIC
ENERGY SERVICES

PAID
9-30-11
FNB SP# 7574

Pratt (620) 672-1201
 B STRATA EXPLORATION
 I PO Box: 401
 L FAIRFIELD
 L IL US 62837
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Naumann 1A-32
 O LOCATION
 B COUNTY Kiowa
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40368698	27463		Net - 30 days	10/13/2011

For Service Dates: 09/08/2011 to 09/08/2011

0040368698

171805028A Cement-New Well Casing/Pi 09/08/2011
 Lost Circulation

LEASE	NAUMANN # 1-32	LEV	5	P/P	9/19
DES	CEMENT NEW WELL			A/P	8/22
DRL	X	COM	LOE	G/L	71890/3590 ²⁴
				D/D	

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
Thixotropic	100.00	EA	18.48	1,848.00 T
Unit Mileage Charge-Pickups, Vans & Cars	30.00	HR	3.27	98.18
Heavy Equipment Mileage	60.00	MI	5.39	323.40
Proppant and Bulk Delivery Charges	141.00	MI	1.23	173.71
Depth Charge: 0-500'	1.00	HR	770.00	770.00
Blending & Mixing Service Charge	100.00	MI	1.08	107.80
Supervisor	1.00	HR	134.75	134.75

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	3,455.84
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	134.90
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	3,590.74
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



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

FIELD SERVICE TICKET
1718 05020 A

DATE _____ TICKET NO. _____

DATE OF JOB 9-8-11		DISTRICT Pratt		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 Sh. An. Exploration				LEASE Wagon				WELL NO. 111							
ADDRESS				COUNTY Rice				STATE KS							
CITY				STATE				SERVICE CREW O. L. ... M. ...							
AUTHORIZED BY				JOB TYPE: C. ...											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
27283	11						9-7-11								
27413	11					ARRIVED AT JOB	9-7-11			(AM/PM)					
11051-1-263	11					START OPERATION				(AM/PM)					
						FINISH OPERATION				(AM/PM)					
						RELEASED				(AM/PM)					
						MILES FROM STATION TO WELL				300					

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
C-1107	Viscoteap	SK	100		3400.00
E100	Pickup mileage	mi	50		175.00
E101	Heavy Equipment mileage	mi	60		420.00
E113	Bulk Solvent	gal	141		2055.00
CE200	Dupon Chair O-500	ea	1		1000.00
CE240	Connect Solvent Chair P	ea	100		1900.00
S003	Service Supervisor	hr	1		1200.00

CHEMICAL / ACID DATA:			

SUB TOTAL		3400.00
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

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.



BASIC
ENERGY SERVICES

PAGE	CUST NO	INVOICE DATE
1 of 1	1004072	08/30/2011
INVOICE NUMBER		
1718 - 90685405		

PAID
9-16-11
PNB 54 7526

Pratt (620) 672-1201
B STRATA EXPLORATION
I PO Box: 401
L FAIRFIELD
L IL US 62837
T
O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Naumann 1-32
O LOCATION
B COUNTY Kiowa
S STATE KS
I JOB DESCRIPTION Cement-New Well Casing/Pi
E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40363177	19905		Net - 30 days	09/29/2011

For Service Dates: 08/25/2011 to 08/25/2011

0040363177

171804491A Cement-New Well Casing/Pi 08/25/2011
8 5/8" Surface

LEASE	NAUMANN 1-32	LEV 5	P/P 9/8
DES	CEMENT SURE PIPE		A/P 9/15
DRL COM LOB	X F	G/L	D/D
		171730/22,809.92	

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
A Serv Lite	200.00	EA	10.01	2,001.94 T
Common	525.00	EA	12.32	6,467.82 T
Thixotropic	175.00	EA	18.48	3,233.91 T
Cello-flake	138.00	EA	2.85	393.15 T
Calcium Chloride	1,497.00	EA	0.81	1,210.29 T
Cement Gel	330.00	EA	0.19	63.52 T
Flow-Seal 11 (Sodium Silicate) 12% Solu.	500.00	EA	4.62	2,309.93 T
Top Rubber Cement Plug 8 5/8"	1.00	EA	173.25	173.25
Baffle Plate Aluminum 8 5/8" (Blue)	1.00	EA	130.90	130.90
8 5/8" Basket (Blue)	1.00	EA	242.54	242.54
Unit Mileage Charge-Pickups, Vans & Cars	30.00	HR	3.27	98.17
Heavy Equipment Mileage	150.00	MI	5.39	808.48
Proppant and Bulk Delivery Charges	1,250.00	MI	1.23	1,539.96
Depth Charge; 501-1000'	1.00	HR	923.97	923.97
Blending & Mixing Service Charge	900.00	MI	1.08	970.17
Plug Container Utilization Charge	1.00	EA	192.49	192.49
Supervisor	1.00	HR	134.75	134.75
Cement Pumper, Addtl hrs on location	2.00	HR	384.99	769.98

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	21,665.22
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	1,144.68
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	22,809.90 ✓
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



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

FIELD SERVICE TICKET

1718 04491 A

DATE _____ TICKET NO. _____

DATE OF JOB 8-25-11 DISTRICT KANSAS		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 Strata Exploration Inc		LEASE Naumann # 1-32 WELL NO.							
ADDRESS		COUNTY kiowa 32-2118 STATE KANSAS							
CITY STATE		SERVICE CREW Allen, Brady, Bryan							
AUTHORIZED BY		JOB TYPE: 8-1/8 surface							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	8-25-11	AM	7 TIME
28943 P.U.	3.1					ARRIVED AT JOB		AM	1:30
19903-19905	3.1					START OPERATION		AM	3:00
19960-19918	3.1					FINISH OPERATION		AM	4:00
						RELEASED		AM	
						MILES FROM STATION TO WELL 30 miles			

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	
CP106	A Serv Life	SK	200		\$ 2600.00	
CP100	Common	SK	175		\$ 2800.00	
CP102	Thin A Tropic	SK	175		\$ 4200.00	
CP100	common	SK	350		\$ 5600.00	
CC102	Cell Flake	lb	138		\$ 5600.00	
CC104	Calcium Chloride	lb	1017		\$ 510.00	
CC200	Cement Gel	lb	530		\$ 1062.00	
CF105	Top Rubber cont Plug 8-7/8"	EA	1		\$ 82.50	
CF733	Baffle Plate Aluminum 8-7/8 Blue	EA	1		\$ 225.00	
CF1905	8-7/8 Basket Blue	EA	1		\$ 170.00	
CC104	Calcium Chloride	lb	480		\$ 315.00	
CC159	Flow-Seal II Sodium Silicate 12/0gn	gn	500		\$ 504.00	
E100	Unit mileage Charge Pick up	m	30		\$ 3000.00	
E101	Heavy Equip mileage	m	150		\$ 127.50	
E113	Bulk Del. Charge	Tm	1250		\$ 1050.00	
CE201	Depth Charge 501-1000	4-h	1		\$ 1549.00	
CE240	Blindering Lining Service Chg	SK	500		\$ 1200.00	
CE304	Plug container Utilization Chg	Job	1		\$ 1260.00	
5003	Service Supervisor first hrs rate	EA	1		\$ 225.00	
CE402	Cement Pump, addit. cost hrs. rate	hr	2		\$ 175.00	
					SUB TOTAL	\$ 21,004.50

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE **Allen, Bryan** THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: **Allen, Bryan**
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____



rgy services, L.P.

TREATMENT REPORT

Customer: Strata Explor. Lease No. #1 Date: 8-24-11
 Lease: NAUMANN Well # 1-32
 Field Order # #104492A Station Pratt Casing 8-5/8 Depth 481 County Kiowa State KS
 Type Job 8-5/8" Surface Formation TD 493 Legal Description 37-27-18

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
5/8			200	Ks A Serv Lite	13.3			
Depth 481	Depth	From	To 17.5	Pre Pad	Max		5 Min.	
Volume 28	Volume	From	To	Pad	Min		10 Min.	
Max Press 300	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection PL	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth 441	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative: Shane TP Station Manager: Scotty Treater: Allen

Service Units	19903	19905	19960	19918
Driver Names	Allen	Brad Mitchell	Dale	Phye

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
7:30 AM					on loc. Discuss Ent. l, set on main well rig @ 493' lost CIR.
2:30 PM					start in hole w/ bit 'Dry Drill'
6:51					start out of hole w/ Bit.
7:20					out of hole w/ Bit
7:30					Rig up to run 8-5/8 csg. 23' +
8:30					start 8-5/8 csg. - Baffle shoe 90' from
			58	5	CIR w/ Rig. 481 - NO CIR
			42		st mix 200 sks A Serv Lite @ 13.3
					st mix 17.5 sks com. w/ 2% OGC
				5	30% OGC, 1/4" C.F @ 15'
9:30			28		start Disp. After Plug Release
10:00					Plug Down - NO CIR - Shut IN
12:30 AM 8-25-11					@ well - order more cement
			37	2	Run 4-Joints 1" pipe - 80 Total
			37	2	mix 17.5 sks com. 2% OGC
2:00					mix 17.5 sks com. Neat.
					NO CIR - Job complete.
					wait 4-5 hrs.

cont.



rigy services, L.P.

#2

TREATMENT REPORT

Customer STATA Explor. INC	Lease No.	Date 8-25-11
Lease NUMANN	Well # 1-32	
Field Order # 0449 A	Station Pratt	Casing 5 7/8
Type Job EM 5 7/8 surface	Formation cnw	Legal Description 32-27-13
	Depth	County KIAWA
		State KS

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 5 7/8	Tubing Size	Shots/Ft		Acid 18 BBL CC water	RATE	PRESS	ISIP	
Depth	Depth	From	To	Pre Pad 12 BBL Flo-cek	Max		5 Min.	
Volume	Volume	From	To	Pad 17 ThixATropic @ 15 #	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 SHANE TP	Station Manager SCOTTY	Treater ALLEN
-------------------------------------	---------------------------	------------------

Service Units	28443	19923	19925	19960	19918				
Driver Names	ALLEN	BRAD	MITCHELL	DALC	PHYE	BRYAN	WHEAT	FICKER	

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
11:30 AM					DN HOE DISCUS SAFETY SET UP PLUM TUB
					RIG DUMP CHEAT + COTTON SPOOL
					HULLS DOWN HOLE
12:05 PM			18	2 1/2	PUMP 18-BBL 5% CC WATER
			12	2 1/2	PUMP 12-BBL FLO-CEK
				2 1/2	MIX + PUMP 50 SKS THIXATROPIC @ 15 #
12:45			15		FINISH MIX - WAIT ON CRT
					RIG DUMP CHEAT + HULLS DOWN HOLE
1:45			15	2 1/2	MIX 50 SKS THIXATROPIC @ 15 #
2:35			23	2 1/2	MIX 75 SKS THIXATROPIC @ 15 #
					NO CIR.
3:00					JOB COMPLETE.
					TRY + TOP OFF W/ REDI MIX

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



PAGE 1 of 1	CUST NO 1004072	INVOICE DATE 08/30/2011
INVOICE NUMBER 1718 - 90685911		

PAID
9-16-11
FNB SALL 752

Pratt (620) 672-1201
 B STRATA EXPLORATION
 I PO Box: 401
 L FAIRFIELD
 T IL US 62837
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Naumann 1-32
 O LOCATION
 B COUNTY Kiowa
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40363376	19905		Net - 30 days	09/29/2011

For Service Dates: 08/26/2011 to 08/26/2011

0040363376
 171804724A Cement-New Well Casing/Pi 08/26/2011
 P.T.A.

LEASE	NAUMANN 1-32	LEV	5	P/P	9/8
DES	CEMENT	COM	LOE	G/171890	2.233
DRL	X	COM	LOE	G/171890	2.233

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
60/40 POZ	70.00	EA	9.24	646.82 T
Cement Gel	122.00	EA	0.19	23.48 T
Unit Mileage Charge-Pickups, Vans & Cars	30.00	HR	3.27	98.15
Heavy Equipment Mileage	60.00	MI	5.39	323.31
Proppant and Bulk Delivery Charges	92.00	MI	1.23	113.31
Depth Charge; 0-500'	1.00	HR	769.78	769.78
Blending & Mixing Service Charge	70.00	MI	1.08	75.44
Supervisor	1.00	HR	134.71	134.71

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	2,184.80
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	48.92
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	2,233.72
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



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 04724 A

DATE _____ TICKET NO. _____

DATE OF JOB: 8-20-11		DISTRICT: [Handwritten]		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: [Handwritten]				LEASE: [Handwritten]				WELL NO.:							
ADDRESS: [Handwritten]				COUNTY: [Handwritten]				STATE: [Handwritten]							
CITY: [Handwritten]				STATE: [Handwritten]				SERVICE CREW: [Handwritten]							
AUTHORIZED BY: [Handwritten]				JOB TYPE: [Handwritten]											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]					
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	ARRIVED AT JOB	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]					
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	START OPERATION	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]					
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	FINISH OPERATION	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]					
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	RELEASED	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]					
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	MILES FROM STATION TO WELL	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]					

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
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]
[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]	[Handwritten]

SUB TOTAL

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: [Handwritten]	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Handwritten]
---------------------------------------	---

FIELD SERVICE ORDER NO. _____

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

