

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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

3/23/12

OPERATOR: License # 31885
Name: M & M Exploration, Inc.
Address 1: 4257 Main St., Suite 230
Address 2: _____
City: Westminster State: CO Zip: 80031
Contact Person: Mike Austin
Phone: (303) 438-1991
CONTRACTOR: License # 33350
Name: Southwind Drilling LLC
Wellsite Geologist: Mike Pollok
Purchaser: ONEOK

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 #: _____

<u>Nov. 29, 2010</u>	<u>Dec. 10, 2010</u>	<u>March 7, 2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007236090000
Spot Description: _____
E/2 W/2 NE NW Sec. 19 Twp. 34 S. R. 14 East West
660 Feet from North / South Line of Section
1,800 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barber
Lease Name: Z Bar Well #: 19-3
Field Name: Aetna Gas Area
Producing Formation: _____
Elevation: Ground: 1688' Kelly Bushing: 1697'
Total Depth: 5180' Plug Back Total Depth: 5138'
Amount of Surface Pipe Set and Cemented at: 912 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: _____ 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 #: _____

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.

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.

Signature: Mike Austin
Title: President Date: March 23, 2011

KCC Office Use ONLY **RECEIVED**

Letter of Confidentiality Received
Date: 3/23/11 - 3/23/12 **MAR 25 2011**

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NB Date: 3-31-11

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Operator Name: M & M Exploration, Inc. Lease Name: Z Bar Well #: 19-3
Sec. 19 Twp. 34 S. R. 14 East West County: Barber

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Penn	3097 -1400
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner Shale	4004 -2307
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Cherokee Shale	4827 -3130
		Mississippian	4856 -3159

List All E. Logs Run:
Induction, Density/Neutron, MicroLog

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
Conductor	30"	20"	64#	44'	Grout		
Surface	12 1/4"	8 5/8"	24#	912'	65/35 & A	275 & 150	3% cc, 2% gel
Production	7 7/8"	4 1/2"	11.6#	5174'	AA2	250	10% salt, 10% Calset

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
1	4846-4850, 4872-4890		
2	4892-4910	2500 gal 15% MCA	
		Frac w 5265 BW & 100,000# sand	

TUBING RECORD:	Size: <u>2 3/8"</u>	Set At: <u>4926'</u>	Packer At: <u>None</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. March 18, 2011	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. <u>20</u>	Gas Mcf <u>180</u>	Water Bbls. <u>100</u>	Gas-Oil Ratio <u>9,000</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 <input type="checkbox"/> Other (Specify) _____ <i>(Submit ACO-5) (Submit ACO-4)</i>	PRODUCTION INTERVAL: <u>4846-4910 OA</u>
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P.O. # _____

BIG BUCKETS RATHOLE DRILLING

4537

ORDERED BY

P.O. Box 5252

Enid, Oklahoma 73702

Phone (580) 233-9850

Fax (580) 233-4588

Date 11/5/10

Bill To M & M Exploration Inc

Lease Z-BAR # 19-3

Address _____

Legal Sec 19-34 S-14W

County Barber, KS

Rig Southwind King

DESCRIPTION	AMOUNT
Furnish Men & Equipment To <u>Shell collar & 46 ft. of 30" hole remove dirt from hole</u>	
Materials Furnished <u>42 ft. of 20" pipe - 4 yds of 8" of gravel & 4' of 6" timbers (crown beam)</u>	5040.00
Operator <u>Paul Wood</u>	}
Approved By _____	Total 5040.00

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BASIC

energy services, L.P.

TREATMENT REPORT

Customer Mand M Exploration, Inc.	Lease No.	Date 12-12-10
Lease Z Bar	Well # 3-19	
Field Order # 3123	Station Pratt, Kansas	Casing 11.616
		Depth 5174 Feet
Type Job C.N.W. Longstring	Formation	County Barber
		State Kansas
		Legal Description 19-345-14W

PIPE DATA		PERFORATING DATA		MATERIAL USED		TREATMENT RESUME	
Casing Size 11.616	Tubing Size 4.5	Shots/Ft 250	From 25	AA 2 with Cellulose, 6 Lb./s	RATE 108 Salt	PRESS 10.8 Cal	ISIP Set. 89 FLA-322
Depth 5174 Feet	Depth	From	To	14.8	Max Gilsonite		5 Min.
Volume 80.2 Bbl.	Volume	From	To	1.6 Gal, 6.52 Gal	Min 1.5	4 CU.FT./	10 Min.
Max Press. 1500 P.S.I.	Max Press.	From	To		Avg		15 Min.
Well Connection Plug Container	Annulus Vol.	From	To	30 sacks of above blend	HHP Used Plug Rat Hole		Annulus Pressure
Plug Depth 5154 Feet	Packer Depth	From	To	Flush 80 BBL 29 ft	Gas Volume		Total Load

Customer Representative Alan Vratil	Station Manager David Scott	Treater Clarence R. Messick
Service Units 19,866	19,889	19,842
Driver Names Messick	Orlando	Mitchell
19,826	19,860	

Time P.M.	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
7:00					Trucks on location and hold safety meeting.
8:35					Southwind Drilling start to run Auto Fill Guide Shoe, Shoe Joint with latch Down Baffles screwed into collar and a total of 12 Joints new 11.6 Lb./ft. 4 1/2" casing. A Basher was installed above collar # 10. A Turbolizer was installed on Collars # 1, 3, 5, 7, 12, 15, 18 and # 20.
11:50					Casing in well Circulate for
1:10	400		68	5	start mixing 250 sacks AA 2 cement.
	-0-				Stop pumping. Shut in well. Wash pump and lines Release latch Down Plug. Open Well.
1:28	100		60	6.5	Start 28 TCCL Displacement.
			80	5	Start to lift cement.
1:45	1000				Plug down.
	1,500				Pressure up.
					Release pressure Flout Shoe held the 2 nd time.
	-0-		7	3	Plug Rat hole with 30 sacks AA 2 cement. Wash up pump truck.
2:30					Job Complete Thank You Clarence, Steve, Brad

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FIELD SERVICE TICKET
1718 03123 A

sas 07124
620-672-1201

L9-345-14W

DATE _____ TICKET NO. _____

DICT <u>Pratt, Kansas</u> Oil Exploration, Incorporated		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.:	
LEASE <u>Z Bar</u>		WELL NO <u>3-14</u>	
COUNTY <u>Barber</u>		STATE <u>Kansas</u>	
CITY _____ STATE _____		SERVICE CREW <u>C. Mitchell, S. Orourke, B. Mitchell</u>	
AUTHORIZED BY _____		JOB TYPE: <u>C.N.W. Longstrum</u>	

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>19,866</u>	<u>75</u>						<u>12 11 10</u>			<u>1:00</u>
						ARRIVED AT JOB	<u>12 11 10</u>			<u>7:00</u>
<u>19842-19889</u>	<u>75</u>					START OPERATION	<u>12 12 10</u>			<u>1:10</u>
						FINISH OPERATION				<u>1:55</u>
<u>19526-19860</u>	<u>75</u>					RELEASED	<u>12 12 10</u>			<u>2:00</u>
						MILES FROM STATION TO WELL	<u>65</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
CP 109	A 2 Cement	sk	280		
CC 102	Cellulose	Lb	70		
CC 111	Salt (Fine)	Lb	1527		
CC 113	Cul Set	LL	1320		
CC 129	FLA-323	LL	212		
CC 201	Gilsonite	LL	1620		
CF 606	Latch Down Plug and But 1/2"		1		
CF 1250	Auto Fill Plug and Shut 4 1/2"		1		
CF 1650	Turb 1/2-1 4 1/2"		2		
CF 1900	Butt 1/2 4 1/2"		1		
C 704	CS-2L	Gal	4		
E 100	Pickup Mileage	mi	65		
E 101	Heavy Equipment Mileage	mi	130		
E 113	Bulk Delivery	tm	258		
CF 206	Cement Pump: 5,000 Feet To 6,000 Feet	hrs	4		
CE 240	Blending and Mixing Service	sk	280		
CF 504	Plug Container	tbl	1		
5003	Service Supervisor	hr	1		

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CHEMICAL / ACID DATA:			

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

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

ALLIED CEMENTING CO., LLC. 040579

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge

DATE <i>11.30.2010</i>	SEC. <i>19</i>	TWP. <i>34S</i>	RANGE <i>14W</i>	CALLED OUT <i>3:00AM</i>	ON LOCATION <i>6:00AM</i>	JOB START <i>3:00pm</i>	JOB FINISH <i>4:00pm</i>
LEASE <i>2-Bgr</i>	WELL # <i>19-3</i>	LOCATION <i>160 & Deerhead Rd, South</i>			COUNTY <i>Berhar</i>	STATE <i>KS</i>	
OLD OR <u>NEW</u> (Circle one)		<i>to Cottage Creek Rd, 4.2 E, S & E 60/1 into</i>					

CONTRACTOR *Southwind*
 TYPE OF JOB *Surface*
 HOLE SIZE *12 1/4* T.D. *912'*
 CASING SIZE *8 5/8* DEPTH *912'*
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT *40'*
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT *5 1/2 bbls of fresh water*

OWNER *M & M Exploration*

CEMENT
 AMOUNT ORDERED *275 sq 65:35:6 %*
Gei + 3%oc6 + 1/4 # Floseal, 150 sq
CISSA A + 3%oc6 + 2% Gei

COMMON <i>A</i>	<i>150 sq</i>	@ <i>15.45</i>	<i>2317.50</i>
POZMIX		@	
GEL	<i>3 sq</i>	@ <i>20.80</i>	<i>62.40</i>
CHLORIDE	<i>15 sq</i>	@ <i>58.20</i>	<i>873.00</i>
ASC		@	
<i>ALW</i>	<i>275 sq</i>	@ <i>14.80</i>	<i>4070.00</i>
<i>Floseal</i>	<i>68.75 sq</i>	@ <i>2.50</i>	<i>171.87</i>
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<i>458</i>	@ <i>2.40</i>	<i>1099.20</i>
MILEAGE	<i>458 / 10/25</i>		<i>1145.00</i>
TOTAL			<i>9738.92</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Derin F*
 # *360-265* HELPER *mat + T*
 BULK TRUCK
 # *356-250* DRIVER *Jason T*
 BULK TRUCK
 # DRIVER

REMARKS:

*Pipe on bottom & broke circulation
 Pump 3 bbls fresh water ghesa mix
 275 sq of less cement, mix 150sq of
 15.1 cement, shut down, Release plug
 Start displacement, slow rate to 3bpm
 9-50 bbls, Pump plug at 5 1/2 bbls
 500-1,000 psi, Flost did hold
 Cement did Circulate*

SERVICE

DEPTH OF JOB *912'*
 PUMP TRUCK CHARGE *1018.00*
 EXTRA FOOTAGE *612* @ *.85* *520.20*
 MILEAGE *25* @ *7.00* *175.00*
 MANIFOLD @
Hesarentei @
 RECEIVED @
 MAR 25 2011
 TOTAL *1713.20*

CHARGE TO: *M & M Exploration*
 STREET _____
 CITY _____ STATE _____ ZIP _____

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PLUG & FLOAT EQUIPMENT

8 5/8

<i>1-Rubber plug</i>	@	<i>113.00</i>
<i>1-AFU Insert</i>	@	<i>158.20</i>
<i>-Canters</i>	@	
<i>-Basket</i>	@	
TOTAL <i>271.20</i>		

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME *x William Sanders*
 SIGNATURE *x William Sanders*

SALES TAX (If Any) _____
 TOTAL CHARGES ~~_____~~
 DISCOUNT _____ IF PAID IN 30 DAYS

Thank You!!!