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KANSAS CORPORATION COMMISSION JUL 26 2010 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 KCC WICHITA

WELL HISTORY - DESCRIPTION OF WELL & LEASE

7/22/10

OPERATOR: License # 31885

Name: M & M Exploration, Inc.

Address 1: 60 Garden Center, Suite 102

Address 2:

City: Broomfield State: CO Zip: 80020

Contact Person: Mike Austin

Phone: (303) 438-1991

CONTRACTOR: License # 33350

Name: Southwind Drilling LLC

Wellsite Geologist: Mike Pollok

Purchaser:

Designate Type of Completion:

- Checkboxes for 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:

- Checkboxes for Deepening, Re-perf., Conv. to ENHR, Conv. to SWD, Conv. to GSW, Plug Back, Commingled, Dual Completion, SWD, ENHR, GSW with Permit # fields

March 30, 2010 April 9, 2010 May 27, 2010 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 067-21674-00-00

Spot Description:

E/2, W/2, NE Sec. 26 Twp. 34 S. R. 5 East West 1,329 Feet from North/South Line of Section 1,623 Feet from East/West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- Checkboxes for NE, NW, SE, SW

County: Harper

Lease Name: Sheen Well #: 1-26

Field Name:

Producing Formation:

Elevation: Ground: 1189 Kelly Bushing: 1198

Total Depth: 4963' Plug Back Total Depth: 4898'

Amount of Surface Pipe Set and Cemented at: 346' 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: 225 bbls

Dewatering method used:

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: Kerri Ann SWD License #:

Quarter Sec. 5 Twp. 28N S. R. 5 East West

County: Grant Co., OK 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: [Signature]

Title: President Date: July 22, 2010

KCC Office Use ONLY

- Checkboxes for Letter of Confidentiality Received, Confidential Release Date, Wireline Log Received, Geologist Report Received, UIC Distribution, ALT I II III Approved by [Signature] Date: 5-10-10

Operator Name: M & M Exploration, Inc. Lease Name: Sheen Well #: 1-26
 Sec. 26 Twp. 34 S. R. 5 East West County: Harper

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Induction, Density-Neutron, Microlog, Sonic	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner Shale</td> <td>3073</td> <td>-1875</td> </tr> <tr> <td>Cherokee Shale</td> <td>4252</td> <td>-3054</td> </tr> <tr> <td>Mississippian</td> <td>4472</td> <td>-3274</td> </tr> <tr> <td>Woodford</td> <td>4832</td> <td>-3634</td> </tr> <tr> <td>Simpson</td> <td>4898</td> <td>-3700</td> </tr> </table>	Name	Top	Datum	Heebner Shale	3073	-1875	Cherokee Shale	4252	-3054	Mississippian	4472	-3274	Woodford	4832	-3634	Simpson	4898	-3700
Name	Top	Datum																	
Heebner Shale	3073	-1875																	
Cherokee Shale	4252	-3054																	
Mississippian	4472	-3274																	
Woodford	4832	-3634																	
Simpson	4898	-3700																	

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 1/4"	8 5/8"	23#	346'	60/40	230	3% cc, 2% gel
Production	7 7/8"	5 1/2"	17#	4938'	275	Class H	10% gyp, 10% salt
							6#kolseal, 1/4# flowseal

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	4765-4798	2500 gal 15% MCA	
		Frac w 5184 BW, 110,000# sand	

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>4804'</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. <u>Pending</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. <u>0</u>	Gas Mcf <u>0</u>	Water Bbls. <u>200</u> 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: <u>4765-4798'</u>
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ALLIED CEMENTING CO., LLC. 041485

P.O. BOX 31
RUSSELL, KANSAS 67665

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JUL 22 2010
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SERVICE POINT:
Medicine Lodge

DATE <u>04/10/10</u>	SEC. <u>26</u>	TWP. <u>34s</u>	RANGE <u>05W</u>	CALLED OUT	ON LOCATION	JOB START <u>1:30 AM</u>	JOB FINISH <u>2:30 AM</u>
LEASE <u>Sheen</u>	WELL # <u>1-26</u>	LOCATION <u>Bluff City, KS, 1/2s, 3E, 710N,</u>			COUNTY <u>Harper</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>w/into</u>				

CONTRACTOR Southwind #2
 TYPE OF JOB Production Casing
 HOLE SIZE 7 7/8 T.D. 4968
 CASING SIZE 5 1/2 DEPTH 4938
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 1500 MINIMUM —
 MEAS. LINE SHOE JOINT 21
 CEMENT LEFT IN CSG. 21
 PERFS.
 DISPLACEMENT 11 5/2 Bbls 2% KCL Water

OWNER M & M Expl.

CEMENT

AMOUNT ORDERED 50s x 60: 40: 4% gel & 275s x H + 10% salt + 10% log up + 6# Kalscal + 1/4" Flo-seal + .8% FL-160 & 12 gals Clapco

COMMON	<u>30s x</u>	@	<u>15.45</u>	<u>463.50</u>
POZMIX	<u>20s x</u>	@	<u>8.00</u>	<u>160.00</u>
GEL	<u>1s x</u>	@	<u>20.80</u>	<u>20.80</u>
CHLORIDE		@		
ASC		@		
Class H	<u>275s x</u>	@	<u>21.10</u>	<u>5,802.50</u>
Gyp-seal	<u>26s x</u>	@	<u>29.20</u>	<u>759.20</u>
SALT	<u>30s x</u>	@	<u>12.00</u>	<u>360.00</u>
Kal-seal	<u>1650#</u>	@	<u>.89</u>	<u>1,468.50</u>
FL-160	<u>206#</u>	@	<u>13.30</u>	<u>2,739.80</u>
Flo-seal	<u>68#</u>	@	<u>2.50</u>	<u>170.00</u>
KCL	<u>14gal</u>	@	<u>31.25</u>	<u>437.50</u>
HANDLING	<u>325s x</u>	@	<u>2.40</u>	<u>780.00</u>
MILEAGE	<u>325s x 20 x .10 =</u>			<u>650.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER D. Felis
 # 181 HELPER A. Rodaxmel
 BULK TRUCK DRIVER R. Gilley RECEIVED
 # 421-251 JUL 26 2010
 BULK TRUCK DRIVER

KCC WICHITA

REMARKS:

Pipe on Bttm, Break Casing, Plug Rat & Mousettes,
w/ 50s x 60.40 cement, mix 275s x Scavenger
Cement, mix 250s x tail Cement, Stop Pump,
Wash Pump & Lines, Release Plug, Start Disp.
w/ 2% KCL Water, See increase in PSI, Slow Rate,
Bump Plug at
11 5/2 Bbls total Disp., Release PSI, Floats
Did Hold

SERVICE

DEPTH OF JOB	<u>4938</u>		
PUMP TRUCK CHARGE			<u>2011.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>20</u>	@	<u>7.00</u> <u>140.00</u>
MANIFOLD	<u>Head rental</u>	@	
		@	
		@	

TOTAL 2151.00

CHARGE TO: M & M Expl.
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

1-AFU Float Shoe	@	<u>214.20</u>	<u>214.20</u>
1-Latch down Plug Assy.	@	<u>163.80</u>	<u>163.80</u>
1-Basket	@	<u>161.00</u>	<u>161.00</u>
8-turbolizers	@	<u>40.60</u>	<u>324.80</u>

TOTAL 863.80

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 Alon West
 SIGNATURE [Signature]

SALES TAX (If Any) _____
 TOTAL CHARGES [Crossed out]
 DISCOUNT [Crossed out] IF PAID IN 30 DAYS



PAGE	CUST NO	INVOICE DATE
1 of 1	1002800	04/01/2010
INVOICE NUMBER		
1718 - 90283180		

Pratt (620) 672-1201
 B M & M EXPLORATION INC
 I 60 GARDEN CTR STE 102
 L BROOMFIELD
 L CO US 80020
 T
 O ATTN:

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JUL 22 2010
CONFIDENTIAL

J LEASE NAME Sheen 1-26
 O LOCATION
 B COUNTY Harper
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

7173D
B

lut

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40166829	27463		Net - 30 days	05/01/2010

For Service Dates: 03/31/2010 to 03/31/2010

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
0040166829				
171801106A Cement-New Well Casing/Pi 03/31/2010				
Cement	230.00	EA	6.00	1,379.88 T
60/40 POZ				
Additives	58.00	EA	1.85	107.29 T
Cello-flake				
Calcium Chloride	594.00	EA	0.52	311.82 T
Calcium Chloride				
Cement Float Equipment	1.00	EA	79.99	79.99
Wooden Cement Plug 8 5/8"				
Pickup	85.00	HR	2.12	180.61
Unit Mileage Charge-Pickups, Vans & Cars				
Mileage	170.00	MI	3.50	594.94
Heavy Equipment Mileage				
Pump Charge-Hourly	1.00	HR	499.95	499.95
Depth Charge; 0-500'				
Cementing Head w/Manifold	1.00	EA	124.99	124.99
Plug Container Utilization Charge				
Supervisor	1.00	HR	87.49	87.49
Service Supervisor				
Mileage	230.00	MI	0.70	160.98
Blending & Mixing Service Charge				
Mileage	842.00	MI	0.80	673.54
Proppant and Bulk Delivery Charges				

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PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	4,201.48
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	95.35
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	4,296.83
DALLAS, TX 75284-1903	MIDLAND, TX 79702		

FIELD SERVICE TICKET
1718 1106 A



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

JUL 23 2010
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DATE _____ TICKET NO. _____

DATE OF JOB 3-31-10		DISTRICT PRATT, KS.		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 M & M EXPLORATION, INC.				LEASE SHEEN				WELL NO. 1-26	
ADDRESS 1000000				COUNTY HARPER		STATE KS.			
CITY _____ STATE _____				SERVICE CREW LESLEY, MATTEL, MARQUEZ					
AUTHORIZED BY _____				JOB TYPE: CNW - 8 5/8 S.P.					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
27283	.5						3-30-10	PM	7:00
27403	.5					ARRIVED AT JOB		PM	10:30
19862 / 19860	.5					START OPERATION		PM	11:40
						FINISH OPERATION		AM	12:15
						RELEASED		AM	12:45
						MILES FROM STATION TO WELL	85		

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 103	60/40 POZ	SK	230		2,760 00
CC 102	CELL - PAKE	lb	58		214 60
CC 109	CALCIUM CHLORIDE	lb	594		623 70
CF 153	WOODEN CEMENT PLUG, 8 5/8"	EA	1		160 00
E 100	PICK UP MILEAGE CHARGE	MI	85		361 25
E 101	HEAVY EQUIPMENT MILEAGE	MI	170		1,190 00
E 103	BULK DELIVERY CHARGE	TM	842		1,346 40
CE 200	DEPTH CHARGE; 0 - 500'	HRS	1-4		1,000 00
CE 240	BLENDING SERVICE CHARGE	SK	230		322 00
CE 504	PLUG CONTAINER UTILIZATION CHARGE	JOB	1		250 00
S 003	SERVICE SUPERVISOR, FIRST 2 HRS. ON LOC.	EA	1		175 00
					RECEIVED
					JUL 23 2010
					KCC WICHITA

CHEMICAL / ACID DATA:			

SUB TOTAL	4,201 48
SERVICE & EQUIPMENT	%TAX ON \$
MATERIALS	%TAX ON \$
TOTAL	DLS

SERVICE REPRESENTATIVE *Kevin Lesley* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Kevin Lesley*
FIELD SERVICE ORDER NO. _____ (WELL OWNER OPERATOR CONTRACTOR OR AGENT)