

KANSAS CORPORATION COMMISSION 1047801
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 # 5447
 Name: OXY USA Inc.
 Address 1: 5 E GREENWAY PLZ
 Address 2: PO BOX 27570
 City: HOUSTON State: TX Zip: 77227 + 7570
 Contact Person: LAURA BETH HICKERT
 Phone: (620) 629-4253
 CONTRACTOR: License # 33784
 Name: Trinidad Drilling Limited Partnership
 Wellsite Geologist: N/A
 Purchaser: N/A

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>08/12/2010</u>	<u>08/19/2010</u>	<u>10/13/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-055-22078-00-00

Spot Description: _____
 _____ NW NW NW Sec. 9 Twp. 25 S. R. 32 East West
330 Feet from North / South Line of Section
330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Finney

Lease Name: HICKS D Well #: 1

Field Name: UNNAMED

Producing Formation: LANSING

Elevation: Ground: 2859 Kelly Bushing: 2870

Total Depth: 5110 Plug Back Total Depth: 5062

Amount of Surface Pipe Set and Cemented at: 1863 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: 3000 ppm Fluid volume: 1400 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: NICHOLS FLUID SERVICE

Lease Name: JOHNSON License #: 31983

Quarter NW Sec. 16 Twp. 34 S. R. 32 East West

County: SEWARD Permit #: D27805

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: 12/09/2010
- Confidential Release Date: 12/08/2012
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 12/13/2010



1047801

Operator Name: OXY USA Inc. Lease Name: HICKS D Well #: 1
 Sec. 9 Twp. 25 S. R. 32 East West County: Finney

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 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: MICROLOG ARRAY COMPENSATED RESISTIVITY LOG SPECTRAL DENSITY DUAL SPACED NEUTRON LOG	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Name Attached</td> <td style="width:33%; border: none;">Top Attached</td> <td style="width:33%; border: none;">Datum Attached</td> </tr> </table>	Name Attached	Top Attached	Datum Attached
Name Attached	Top Attached	Datum Attached		

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	0	60	N/A	0	N/A
SURFACE	12.25	8.625	24	1863	A-CON/PREM PLUS	630	SEE ATTACHED
PRODUCTION	7.875	5.5	17	5103	A-CON/50-50 POZ	285	SEE ATTACHED

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
Attached	Attached	Attached	Attached

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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

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>4330'-4343' LANSING</u>
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Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	HICKS D 1
Doc ID	1047801

Tops

CHASE	2534	
COUNCIL GROVE	2822	
HEEBNER	3889	
LANSING	3935	
MARMATON	4455	
CHEROKEE	4589	
ATOKA	4735	
MORROW	4776	
ST. GENEVIEVE	4843	
ST. LOUIS	4862	

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	HICKS D 1
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Perforations

6	4773'-4778', 4783'-4789' MORROW	70 bbl 7% KCl	4773-4789
		ACID: 450 gal. 5% HCl ACID, 450 gal.	4773-4789
		3% HC ACID, 600 gal. 0.5% HF ACID	
		FLUSH: 1210 gal. 2% NH4Cl	
		FRAC: 65000 gal. CO2 X-LINK FOAM	4773-4789
		w/ 4% KCl WATER BASE FLUID, 140000#	
		BRADY BROWN SAND WITH 144.68 TONS CO2	
		FLUSH: 4661 gal. CO2	
	CIBP W/ 2 SKS CMT		4750
6	4459'-4464' MARMATON	25 bbl 4% KCl	4459-4464
	CIBP W/ 2 SKS CMT		4416
6	4330'-4343' LANSING	36 bbl 4% KCl	4330-4343



BASIC
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 01027 A

DATE _____ TICKET NO. _____

DATE OF JOB 8-14-10	DISTRICT 1717	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 Oxy USA	LEASE Hicks "D"		WELL NO. 1				
ADDRESS		COUNTY Finney	STATE Ks				
CITY		STATE		SERVICE CREW Cochran/Seymour/Reuben C. / [Signature]			
AUTHORIZED BY Bennett JRB		JOB TYPE: Z 42 8 1/2 surface					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE & TIME
21755	6	19559	5				8-14 12:30
27808	6	19578	5			ARRIVED AT JOB	8-14 12:30
19553	6					START OPERATION	8-14 17:00
19528	5					FINISH OPERATION	8-14 18:30
19523	5					RELEASED	8-14 19:30
						MILES FROM STATION TO WELL	65

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: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL101	A-con Blend	SK	430		7998 00
CL110	Premium Plus	SK	200		3260 00
CC109	Calcium Chloride	lb	1591		1670 55
CC102	Cellulose	lb	265		980 50
CC130	C-51	lb	81		2025 00
CF1453	Insert	ea	1		280 00
CF253	Guide shoe	ea	1		380 00
CF1773	Centralizer	ea	5		725 00
CF1903	Basket	ea	1		315 00
CF105	Top Plug	ea	1		225 00
E101	Heavy Equip. Mileage	mi	150		1050 00
CE240	Blending + Mixing Service Chrg	SK	630		882 00
E113	Bulk Delivery	Tm	1483		2372 30
CE202	Depth Chrg. 100M - 2000'	4hr	1		1500 00
CE504	Plug Container	job	1		250 00
E100	Pick-up Mileage	mi	50		210 50
5003	Service Supervisor	ea	1		175 00

SUB TOTAL **14969 56**

CHEMICAL / ACID DATA:			

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, L.P.

TREATMENT REPORT

Customer <i>Qxy USA</i>	Lease No.	Date <i>8-14-10</i>
Lease <i>Hicks 'D'</i>	Well # <i>1</i>	
Field Order # <i>1111027</i>	Station <i>Liberal</i>	Casing <i>8 7/8</i>
Type Job <i>Z 4 1/2 8 7/8 surface</i>	Depth <i>1661</i>	County <i>Finney</i>
	Formation	State <i>Ks</i>
		Legal Description <i>7 25 52</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size	Tubing Size	Shots/Ft	430sk 'Acid' Blend - 37 CC	RATE	PRESS	ISP	
Depth	Depth	From	2.96k 1/2" R.10g 1/2" R	Max	11.4	5 MPa	
Volume	Volume	From	200sk Premium Plus	Min	7.9 CC - 1/4 Cell/1sk	250 MPa	
Max Press	Max Press	From	1.34k 1/2" R	From	6.33g 1/2" R @ 14.8	15 MPa	
Well Connection	Annulus Vol.	From	To	Flush	HHP Used	Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush	Gas Volume	Total Load	

Customer Representative <i>Wes Williams</i>	Station Manager <i>J. Bennett</i>	Treater <i>M. Cochran</i>
Service Units <i>2185 2700 1903 1902 1903 1904 1907</i>		
Driver Names <i>Cochran Stroman D. Cassidy R. Chavez</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
12:30					in loc. / Held Safety Meeting
13:30					Bulk on loc.
14:00					Start Csg.
16:30					Csg. on bottom / cir. w/ Rip
17:08	2500				Test Pump + Lines
17:10	100		227	5.5	Start Lead Cmt 430sk @ 11.4
17:46	250		48	3	Start Tail Cmt 200sk @ 14.8
18:02					Shutdown + Drop Plug
18:04	100		0	5.5	Start Disp. w/ fresh fluid
18:24	500		100	2	Slow Rate
18:29	1200		116	2	Bump Plug
18:30	0		116	0	Release / Float Held
19:35					End Job
	650				Pressure Before Plug landed Circulated Cmt to the Pit



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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 01030 A

DATE _____ TICKET NO. _____

DATE OF JOB 8-21-10	DISTRICT 1717	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 Oxy USA		LEASE Hicks "D"				WELL NO: 1		
ADDRESS		COUNTY Finney		STATE Ks				
CITY		STATE		SERVICE CREW Cochran/Gibson/R. Chavez				
AUTHORIZED BY Bennett JRB		JOB TYPE: 242 5 1/2 L.S.						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE AM TIME	
21755	9						8-20 AM 16:00	
27809	9						8-20 AM 22:00	
19853	9						8-21 PM 04:20	
19828	9						8-21 AM 06:00	
19895	9						8-21 AM 07:00	
						MILES FROM STATION TO WELL	66	

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: Paul R. Hansen
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL101	'A-con' Blend	sk	175		3255 00
CL104	50/50 Poz	sk	110		1210 00
CL100	Premium	sk	50		800 00
CC113	Gypsum	lb	465		348 75
CC111	5/14	lb	602		301 00
CC124	F/A-115	lb	56		840 00
CC107	C-42P	lb	24		192 00
CC201	Gilsonite	lb	550		368 50
CC130	C-51	lb	33		825 00
CC102	Celloflake	lb	44		1162 80
CC109	Calcium Chloride	lb	330		346 50
CF1451	Insert	ea	1		215 00
CF1651	Terbalizer	ea	20		2200 00
CF103	Top Plug	ea	1		105 00
CF257	Guide Shoe	ea	1		250 00
CFSD1	Stop Ring	ea	1		40 00
CC155	Super Flush II	gal	500		765 00
E101	Heavy Equip. Mileage	mi	150		1050 00
CF240	Blending & Mixing Service Chrg	sk	335		469 00
SUB TOTAL					11510 61
CHEMICAL / ACID DATA:		SERVICE & EQUIPMENT		%TAX ON \$	
		MATERIALS		%TAX ON \$	
TOTAL					

SERVICE REPRESENTATIVE Mickey Cochran THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Paul R. Hansen
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

BASIC

energy services, L.P.

TREATMENT REPORT

Customer <i>Oxy USA</i>	Lease No.	Date <i>8-20-10</i>	
Lease <i>Hicks "D"</i>	Well # <i>1</i>		
Field Order # <i>17701030</i>	Station <i>Liberal</i>	Casing <i>5 1/2</i>	Depth <i>5106</i>
Type Job <i>Z42 5 1/2 L.S.</i>	Formation	County <i>Finney</i>	State <i>Ks</i>
		Legal Description <i>9-25-32</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size	Tubing Size	Shots/Ft	Acid	DATE	PRESS	ISIP	
		<i>175 sk 1 con</i>	<i>2% CC - 1/4" Cellflare</i>	<i>2% WCA-1</i>		<i>16 IP</i>	
Depth	Depth	From	From	Max		5 Min.	
		<i>3.25 sk</i>	<i>20.8 sk</i>	<i>11.1" H₂O</i>			
Volume	Volume	From	From	With		90 Min.	
		<i>110 sk</i>	<i>5080 Poc</i>	<i>5% W-O - 10% salt - 6% C-15</i>			
Max Press	Max Press	From	Frac	Avg		15 Min.	
		<i>1/4" Defoamer - 5" Gel</i>	<i>Wilsonite</i>				
Well Connection	Annulus Vol.	From	From	Annulus Used		Annulus Pressure	
		<i>1.52 sk</i>	<i>7.5 sk</i>	<i>6.65 sk</i>	<i>138" / 21</i>		
Plug Depth	Packer Depth	From	From	Gas Volume		Total Gas	
		<i>70 sk</i>	<i>Remain</i>	<i>Nest @ 15.0" for Rat Hole</i>		<i>Mouse</i>	

Customer Representative <i>A. Hanson</i>	Station Manager <i>J. Bennett</i>	Treater <i>M. Cochran</i>
Service Units <i>21753 27808 17553 17828 19983</i>		
Driver Names <i>Cochran T. Gibson R. Chance</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>22:00</i>					<i>on loc. / Held Safety Meeting</i>
<i>22:10</i>					<i>Spot + Rig up Equip.</i>
<i>22:30</i>					<i>Start Csg (5106 ft 5 1/2 17")</i>
<i>01:30</i>					<i>Csg. on Bottom Cir w/ Rig</i>
<i>04:29</i>	<i>2500</i>				<i>Test Pump + Lines</i>
<i>04:30</i>	<i>100</i>		<i>5</i>	<i>4</i>	<i>Start Fresh H₂O</i>
<i>04:31</i>	<i>250</i>		<i>12</i>	<i>5</i>	<i>Start Super Flush II</i>
<i>04:34</i>	<i>250</i>		<i>5</i>	<i>5</i>	<i>Start Fresh H₂O</i>
<i>04:36</i>	<i>200</i>		<i>5</i>	<i>3</i>	<i>Switch over to mouse Hole + Plug @ 25'</i>
<i>04:38</i>	<i>200</i>		<i>5</i>	<i>3</i>	<i>Switch over to Rat Hole + Plug w/ 755'</i>
<i>04:40</i>					<i>Switch Back to Pipe</i>
<i>04:54</i>	<i>250</i>		<i>101</i>	<i>6.5</i>	<i>Start Lead Cmt 175 sk @ 11.5"</i>
<i>05:02</i>	<i>250</i>		<i>30</i>	<i>6</i>	<i>Start Tail Cmt 110 sk @ 13.8"</i>
<i>05:17</i>					<i>Shut down + Wash up</i>
<i>05:19</i>					<i>Drop Plug</i>
<i>05:25</i>	<i>200</i>		<i>0</i>	<i>5.5-7</i>	<i>Start Disp. w/ Fresh H₂O</i>
<i>05:43</i>	<i>800</i>		<i>110</i>	<i>3</i>	<i>Slow Rate</i>
<i>05:46</i>	<i>1400</i>		<i>118</i>	<i>3</i>	<i>Bump Plug</i>
<i>05:49</i>	<i>0</i>		<i>118</i>	<i>0</i>	<i>Release / float Held</i>
<i>05:55</i>					<i>End Job</i>
	<i>900</i>				<i>Pressure Before Plug landed</i>

Attachment to Hicks D-1 (API # 15-055-22078)

Cement & Additives

String	Type	# of Sacks Used	Type and Percent Additives
Surface	A-Con	Lead: 430	3% CC, 1/2# Cellflake, 0.2% WCA1
	Prem Plus	Tail: 200	2% CC, 1/4# Cellflake
Production	A-Con	Lead: 175	2%CC, 1/4# Cellflake, 0.2 WCA-1
	50-50 Poz	Tail: 110	5% W-60, 10% Salt, 0.6% C-15, 1/4# Defoamer, 5# Gilsonite



*Mark Parkinson, Governor
Thomas E. Wright, Chairman
Joseph F. Harkins, Commissioner
Ward Loyd, Commissioner*

December 09, 2010

LAURA BETH HICKERT
OXY USA Inc.
5 E GREENWAY PLZ
PO BOX 27570
HOUSTON, TX 77227-7570

Re: ACO1
API 15-055-22078-00-00
HICKS D 1
NW/4 Sec.09-25S-32W
Finney County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
LAURA BETH HICKERT