

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1064274

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 #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from Feast / West Line of Section
Contact Person:	
Phone: ()	
CONTRACTOR: License #	
Name:	
Wellsite Geologist:	
Purchaser:	
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used?
OG GSW Temp. Ab	Dd. If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Fluid Management Plan
Well Name:	
Original Comp. Date: Original Total Depth:	Chloride content: ppm Fluid volume: bbls
Deepening Re-perf. Conv. to ENHR Conv. to	SWD
Conv. to GSW	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	
ENHR Permit #:	
GSW Permit #:	County: Permit #:
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date	

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: Date:

	Side Two	
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	

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 (Attach Additional She	eets)	Yes No			n (Top), Depth an		Sample
Samples Sent to Geolog	gical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	 Yes No Yes No Yes No 					
List All E. Logs Run:							
		Report all strings set-	conductor, surface, inte	ermediate, producti	on, etc.		1
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

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: —— Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Shots Per Foot		PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated							ement Squeeze Record of Material Used)	Depth
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner F	Run:	No	
Date of First, Resumed	Product	ion, SWD or ENHF	λ .	Producing N	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF C	BAS:			METHOD	OF COMPLE	TION:		PRODUCTION IN	TERVAL:
Vented Solo		Jsed on Lease		Open Hole	Perf.	Dually (Submit)	Comp. AC <i>O-5)</i>	Commingled (Submit ACO-4)		
(If vented, Su	bmit ACC)-18.)		Other (Specify)						



Oil & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083 Fax: 913-557-9084 ...

WELL LOG Altavista Energy, Inc. Wise #A-5 API # 15-091-23,509 July 26 - July 28, 2011

Paola, KS 66071

Thickness of Strata	Formation	Total
13	soil & clay	13
25	shale	38
26	lime	64
7	shale	71
6	lime	77
5	sandstone	82
2	lime	84
5	shale	89
14	lime	103
23	shale	126
9	lime	135
3	shale	138
13	lime	151
4	shale	155
38	lime	193
32	shale	225
8	lime	233
18	shale	251
9	lime	260
7	shale	267
5	lime	272
43	shale	315
9	lime	324
4	shale	328
45	lime	373
3	shale	376
17	lime	393 base of the Kansas City
171	shale	564
7	lime	571
5	shale	576
2	coal	578
7	shale	585
5	lime	590
16	shale	606

Wise #A-5		Page 2
7	lime	613
9	shale	622
11	lime	633
21	shale	654
17	lime	671
4	shale	675
13	lime	688
97	shale	785
6	lime	791
30	shale	821
8	lime	829
18	shale	847
2	lime	849
5	shale	854
2	lime	856
5	shale	861
1	lime	862
5	oil sand	867
5	silty shale	872
62	shale	934 TD

Drilled a 9 7/8" hole to 22.1' Drilled a 5 5/8" hole to 934'

Set 22.1' of 7" surface casing cemented with 6 sacks of cement.

Set 922.7' of 2 7/8" threaded and coupled 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp, 1 baffle, 1 seating nipple.

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Wise #A-5

Page 3

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	SOLIDATED all Services, LLC	REMI Consolidated Oil W Dept. P.O. Box Houston, TX	∕ell Services, LLC 970 < 4346	ا Chanut 620/431-9210 • 1-8	Main Office P.O. Box 884 e, KS 66720 00/467-8676 20/431-0012
INVOICE				Invoice #	243035
Invoice Date: 0	7/31/2011 Te	erms: 0/0/30,n/3	======================================	ressessesses Pa	eeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeee
ALTAVISTA E 4595 K-33 H P.O. BOX 12 WELLSVILLE (785)883-40	IGHWAY 8 KS 66092		WISE A-5 32721 SE 16-14-22 JC 07/28/2011 KS)	
Part Number	Descript:			Unit Price	Total
1124		Z CEMENT MIX	128.00		1337.60
1118B 1111		GEL / BENTONITE ED SALT (50 #)	215.00 269.00		43.00 94.15
11110A		(50 # BAG)	640.00		281.60
4402		UBBER PLUG	1.00		28.00
Descriptio 495 CEMENT PUM 495 EQUIPMENT 495 CASING FOO T-106 WATER TRAN 510 MIN. BULK	P MILEAGE (ONE) TAGE SPORT (CEMENT)		Hours 1.00 30.00 923.00 2.50 1.00	.00	Total 975.00 120.00 .00 280.00 330.00

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Parts:	1784.35	Freight:	.00	Tax:	134.27	AR	3623.62
Labor:	.00	Misc:	.00	Total:	3623.62		
Sublt:	.00	Supplies:	.00	Change:	.00		
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Signed

Oakley, KS 785/672-2227 Date

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III 3244 Wise # A-S SE 16 14 CUSTOMER Havista Energy ITRUCK# DRIVER ITRUCK# DRIVER MALING ADDRESS Y 389 Caskan ITRUCK# DRIVER PO Box 128 STATE 210 CODE 389 Caskan ITRUCK# DRIVER	Π`	2721
PO BOX 884, Chanute, KS 65720 FIELD TICKET & TREATMENT REPORT S20-431-9210 or 800-67-8676 CEMENT DATE CUSTOMER WELL NAME & NUMBER SECTION TOWNSHIP I JASHE CUSTOMER WELL NAME & NUMBER SECTION ALBORADRESS SE 14 I WALLYG ADDRESS INCOMER INCOMER INCOMER WOLLS NAME STATE ZIP CODE INCOMER INCOMER WALLYG ADDRESS INCOMER INCOMER INCOMER INCOMER WOLLS NAME STATE ZIP CODE INCOMER INCOMER INCOMER WALLYG ADDRESS MOLE SIZE STO Der Meer INCOMER INCOMER INCOMER INCOMER WOLLS NUMEY MOLE SIZE STO DER MEER TOWNSHIP INCOMER INCOMER<	1.0	L'-
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4402 1 2 ¹ /2 ¹ /		94.15
WOT 243035		281.60
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1,525% SAL		
1.525% SAL		
<u>1.5269</u> cal		
1.5259 CAL		
1.52C9 CAL		
1,5269 ent		
	SALES TAX	134.27
I EST	ESTIMATED TOTAL	3623.62
JTHORIZTIONTITLEPATE		

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I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.