



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

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.): _____

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 #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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 #: _____

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: _____



1064275

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. 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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input 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
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CASING RECORD <input 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

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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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: _____ _____
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**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

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

11 Lewis Drive Paola, KS 66071

WELL LOG
Altavista Energy, Inc.
Wise #A-6
API # 15-091-23,519
July 20 - July 22, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
17	soil & clay	17
48	shale	65
5	lime	70
5	sandstone	75
10	lime	85
15	shale	100
4	lime	104
13	shale	117
3	lime	120
10	shale	130
2	lime	132
38	shale	170
14	lime	184
3	shale	187
18	lime	205
12	shale	217
10	lime	227
45	shale	272
8	lime	280
3	shale	283
12	lime	295
30	shale	325
19	lime	344
4	shale	348
6	lime	354
4	shale	358
7	lime	365
9	shale	374
23	lime	397
2	shale	399
16	lime	415 base of the Kansas City
172	shale	587
6	lime	593
7	shale	600
1	coal	601
6	shale	607

6	lime	613
20	shale	633
5	lime	638
1	coal	639
37	shale	676
11	lime	687
73	shale	760
7	broken sand	767
22	shale	789
4	lime	793
8	shale	801
2	lime	803
55	shale	858
1	coal	859
22	shale	881
2	lime	883
1	oil sand	884
2	shale	886
1	oil sand	887
68	shale	955 TD

Drilled a 9 7/8" hole to 23.9'

Drilled a 5 5/8" hole to 955'

Set 23.9' of 7" surface casing cemented with 5 sacks of cement.

Set 943' of 2 7/8" threaded and coupled 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp and 1 baffle

Core Times		
	<u>Minutes</u>	<u>Seconds</u>
871		33
872		35
873		39
874		48
875	1	9
876		42
877		50
878		42
879		37
880		31
881	2	7
882	1	40
883		58
884		18
885		40
886	1	42
887		42
888		18
889		23
890		21



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 242925

Invoice Date: 07/29/2011 Terms: 0/0/30,n/30

Page 1

ALTAVISTA ENERGY INC
4595 K-33 HIGHWAY
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

WISE A-6
32690
SE 16-14-22 JO
07/22/2011
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	134.00	10.4500	1400.30
1118B	PREMIUM GEL / BENTONITE	225.00	.2000	45.00
1111	GRANULATED SALT (50 #)	259.00	.3500	90.65
1110A	KOL SEAL (50# BAG)	670.00	.4400	294.80
1143	SILT SUSPENDER SS-630,ES	.50	40.4000	20.20
1401	HE 100 POLYMER	.50	47.2500	23.63
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	975.00	975.00
368 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
368 CASING FOOTAGE	943.00	.00	.00
T-106 WATER TRANSPORT (CEMENT)	2.00	112.00	224.00
548 MIN. BULK DELIVERY	1.00	330.00	330.00

Parts:	1902.58	Freight:	.00	Tax:	143.17	AR	3694.75
Labor:	.00	Misc:	.00	Total:	3694.75		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 32690
LOCATION DFZawa
FOREMAN Alan Mader

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-22-11	3244	Wise A-6	SE 16	14	22	JO
CUSTOMER Altavista Energy			TRUCK #			
MAILING ADDRESS P.O. Box 128			DRIVER			
CITY Wellsville			TRUCK #			
STATE KS			DRIVER			
ZIP CODE 66092			TRUCK #			
			DRIVER			

JOB TYPE long string HOLE SIZE 6 HOLE DEPTH 955 CASING SIZE & WEIGHT 2 7/8
CASING DEPTH 943 DRILL PIPE _____ TUBING _____ OTHER buflie 913
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT 5.3 DISPLACEMENT PSI 800 MIX PSI 200 RATE 5 bpm

REMARKS: Held crew meeting. Established rate. Mixed & pumped 1/2 gal E5A 41 & 1/2 gal polymer. Circulated into new pit for 1 hr. Mixed & pumped 134 sk 50150 po2 plus 5# Kalseal, 50% salt, 2% gel pensack. Circulated cement. Flushed pump. Pumped plug to buflie @ 913' Well held 800 PST. Set float. Closed valve.

Evans Energy, Kenny Gunn

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975.00
3406	30	MILEAGE		120.00
5402	943	casing footage		-
5407	min	Ten miles		330.00
5501C	2	transport		224.00
1124	134 sk	50150 po2		1400.30
118B	225 #	gel		45.00
111	259 #	salt		90.65
110A	670 #	bpulseal		294.80
1143	1/2	E5A 41		20.22
1401	1/2	polymer		23.63
1402	1	2 1/2 plug		25.22
		wd # 242925		
			SALES TAX	143.18
			ESTIMATED TOTAL	3694.75

Ravin 3737

AUTHORIZATION Joni Holm

TITLE _____

DATE _____

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.