



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

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: _____



1066625

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				

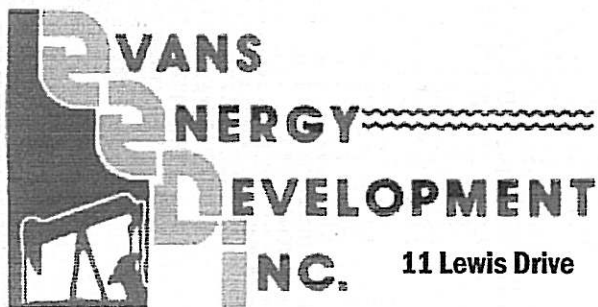
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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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11 Lewis Drive

Paola, KS 66071

**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Altavista Energy, Inc.

Robert Kramer #AI-21

API # 15-091-23,541

August 19 - August 23, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
5	soil & clay	5
2	sandstone	7
83	shale	90
3	lime	93
3	sandstone	96
3	lime	99
10	shale	109
14	lime	123
8	shale	131
9	lime	140
19	shale	159
5	lime	164
22	shale	186
11	lime	197
7	shale	204
49	lime	253
32	shale	285
9	lime	294
16	shale	310
8	lime	318
5	shale	323
15	lime	338
38	shale	376
8	lime	384
11	shale	395
12	lime	407
6	shale	413
19	lime	436
8	shale	440
2	lime	442
3	shale	445
9	lime	454 base of the Kansas City
171	shale	625
5	lime	630
172	shale	802

2	lime	804
14	shale	818
4	lime	822
32	shale	854
3	lime	857
63	shale	920
1	oil sand	921
2	broken sand	923
2	oil sand	925
1	broken sand	926
2	silty shale	928
6	shale	934
6	grey sand	940
50	shale	990 TD

Drilled a 9 7/8" hole to 22.1'

Drilled a 5 5/8" hole to 990'

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

Set 980.5' of 2 7/8" threaded and coupled 8 round upset tubing including 3 centralizers, 1 float shoe, 1 baffel, and 1 clamp.

	Core Times	
	<u>Minutes</u>	<u>Seconds</u>
920		50
921		38
922		36
923		59
924		58
925		41
926		37
927		32
928		31
929		31
930		33
931		36
932		37
933		33
934		34
935		18
936		16
937		48
938		38



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 # 243711

Invoice Date: 08/29/2011 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

ROBERTS KRAMER AI 21
32786
14 22 JO
08/23/2011
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	129.00	10.4500	1348.05
1118B	PREMIUM GEL / BENTONITE	217.00	.2000	43.40
1111	GRANULATED SALT (50 #)	250.00	.3500	87.50
1110A	KOL SEAL (50# BAG)	645.00	.4400	283.80
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
1143	SILT SUSPENDER SS-630,ES	.50	40.4000	20.20
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
369 CEMENT PUMP	1.00	975.00	975.00
369 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
369 CASING FOOTAGE	980.00	.00	.00
369 80 BBL VACUUM TRUCK (CEMENT)	3.00	90.00	270.00
548 MIN. BULK DELIVERY	1.00	330.00	330.00

Parts: 1834.58 Freight: .00 Tax: 138.06 AR 3667.64
 Labor: .00 Misc: .00 Total: 3667.64
 Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 32786
LOCATION Ottawa KS
FOREMAN Fred 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
8/23/11	3244	Robert Kramer # AI-21		14	22	JO
CUSTOMER Alta Vista Energy						
MAILING ADDRESS P.O. Box 128						
CITY Wellsville		STATE KS	ZIP CODE 66092			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			506	FREMAD	Safety Mky	
			368	KENNAM	TH	
			369	HARBEC	RTB	
			548	DERMAS	DM	

JOB TYPE Long string HOLE SIZE 6" HOLE DEPTH 990' CASING SIZE & WEIGHT 2 1/8 EUE
CASING DEPTH 980' DRILL PIPE BAH@ TUBING 950' OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug + 30'
DISPLACEMENT 5.52 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.8 PM

REMARKS: Establish circulation. Mix + Pump 1/2 Gal ESA-41 + 1/2 Gal NE 100
Polymer Flush. Circulate from pit to condition hole. Mix +
Pump 129 sks 50/50 Por Mix Cement 2% Gel 5% Salt 5#
Kol Seal/sk. Cement to surface. Flush pump + lines clean.
Displace 2 1/2" Rubber plug to Baffle w/ 5.52 BBLs fresh
water. Pressure to 700# PSI. Release pressure to set float
Valve. Shut in casing.

Evans Energy Dev Inc (Kenny)

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975 ⁰⁰
5406	30mi	MILEAGE		120 ⁰⁰
5402	980	Casing footage		N/C
5407	Minimum	Ten Miles		320 ⁰⁰
5502C	3hrs	80 BBL Vac Truck		270 ⁰⁰
1124	129 sks	50/50 Por Mix Cement		1348 ⁰⁵
118B	217 #	Premium Gel		43 ⁴⁰
1111	250 #	Granulated Salt		87 ⁵⁰
1110A	645 #	Kol Seal		283 ⁰⁰
4402	1	2 1/2" Rubber Plug		28 ⁰⁰
1143	1/2 Gal	ESA-41		20 ²⁰
1401	1/2 Gal	NE 100 Polymer		23 ⁶³
			7.525%	SALES TAX
				ESTIMATED
				TOTAL

243711

Revin 3737

AUTHORIZATION [Signature] 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.