



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: _____



1075130

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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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 # 239058

Invoice Date: 01/12/2011 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

NICKEL 4
 27343
 SE 15-22-16 CF
 01/07/2011

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	32.00	9.8400	314.88
1118B	PREMIUM GEL / BENTONITE	59.00	.2000	11.80
1111	GRANULATED SALT (50 #)	74.00	.3300	24.42
1110A	KOL SEAL (50# BAG)	175.00	.4200	73.50

Description	Hours	Unit Price	Total
495 CEMENT PUMP (SURFACE)	1.00	725.00	725.00
495 EQUIPMENT MILEAGE (ONE WAY)	.00	3.65	.00
495 CASING FOOTAGE	42.00	.00	.00
T-106 WATER TRANSPORT (CEMENT)	2.50	112.00	280.00
510 TON MILEAGE DELIVERY	66.15	1.20	79.38

Parts: 424.60 Freight: .00 Tax: 26.75 AR 1535.73
 Labor: .00 Misc: .00 Total: 1535.73
 Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27343
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
1/7/11	3244	Nickle #4	SE 15	22	16	CF
CUSTOMER Alta Vista Energy						
MAILING ADDRESS P.O. Box 128						
CITY Wellsville		STATE KS	ZIP CODE 66092			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			506	Fred	Safety	Mxy
			485	Casey	IK	
			505/T106	Arleen	AM	
			510	Tim	THV	

JOB TYPE Surface HOLE SIZE 9 1/2 HOLE DEPTH 42' CASING SIZE & WEIGHT 7"
CASING DEPTH 42' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 10' +
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 4BPM

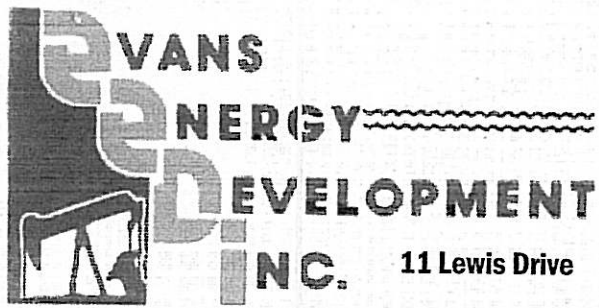
REMARKS: Establish Circulation thru 7" casing. Mix + Pump 35 sks
50/50 Por Mix Cement 2% Cel 5% Salt 5# Kal Seal /sk. Cement
to surface. Displace 7" casing clean w/ BBIS
fresh water. Shut in casing

Evans Energy Dev. Inc. Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE <u>Surface</u>		725 ⁰⁰
5406	0.	MILEAGE <u>Truck on lease</u>		NIC
5402	42'	Casing Footage		NIC
5407A	66.15	Top Miles.		77.38
5501C	2 hrs	Transport		280 ⁰⁰
1124	32	50/50 Por Mix Cement		314 ⁸⁸
1115B	59#	Premium Cel		11.60
1111	74#	Granulated Salt		281.42
1110A	175#	Kal Seal		73 ⁵⁰
<u>NOTE # 239058</u>				
			6.3%	SALES TAX
				ESTIMATED
				TOTAL
				26 ²⁵
				1535 ²³

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.



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.

Nickel #4

API#15-031-22,780

January 7, 2011 - January 17, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
28	soil & clay	28
7	gravel	35
2	clay	37
185	shale	222
54	lime	276
99	shale	375
17	lime	392
21	shale	413
17	lime	430
6	shale	436
20	lime	456
14	shale	470
14	lime	484
39	shale	523
10	lime	533
17	shale	550
42	lime	592
20	shale	612
37	lime	649
163	shale	812
12	lime	824
8	shale	832
18	lime	850
43	shale	893
4	lime	897
6	shale	903
7	lime	910
10	shale	920
15	lime	935
5	shale	940
6	lime	946
20	shale	966
4	lime	970
5	shale	975
8	lime	983
29	shale	1012

Nickel #4

Page 2

2	lime & shells	1014
2	shale	1016
1	lime	1017
3	shale	1020
0.5	broken sand	1020.5
16.5	silty shale	1037 TD

Drilled a 9 7/8" hole to 41.9'.

Drilled a 5 5/8" hole to 1037'.

Set 41.9' of 7" surface casing cemented with 10 sacks gel, cemented by Consolidated Oil Service .

This well was plugged with 10 sacks of cement at 1037', 10 sacks at 660', 10 sacks at 240', and filled with cement from 240' to surface.

Core Times

	<u>Minutes</u>	<u>Seconds</u>
1017		41
1018		36
1019		29
1020		21
1021		23
1022		25
1023		24
1024		26
1025		32
1026		36
1027		36
1028		34
1029		36
1030		30
1031		45
1032	1	51
1033	1	57
1034	1	31
1035	1	40