



1077838

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 Bbbs.	Gas Mcf	Water Bbbs.	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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Johnson County, KS
Well: McCann B A-2
Lease Owner: Alta Vista

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
2/15/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-12	Soil-Clay	12
6	Lime	18
8	Shale	26
16	Lime	42
7	Shale	49
8	Lime	57
9	Shale	66
15	Lime	81
22	Shale	103
75	Lime	178
31	Shale	209
8	Lime	217
15	Shale	232
5	Shale & Lime	237
7	Lime	244
2	Shale	246
10	Lime	256
33	Shale	289
1	Lime	290
9	Shale	299
27	Lime	326
6	Shale	332
23	Lime	355
4	Shale	359
5	Lime	364
5	Shale	369
6	Lime	375
54	Shale	429
41	Sand	470
14	Shale	484
16	Sand	500
49	Shale	549
4	Lime	553
3	Shale	556
1	Lime	557
8	Shale	565
7	Lime	572
16	Shale	588
3	Lime	591
8	Shale	599

McLean B Farm: Johnson County

KS State; Well No. A-2

Elevation 1031

Commenced Spuding Feb 15 2012

Finished Drilling Feb 16 2012

Driller's Name Wesley Dillard

Driller's Name

Driller's Name

Tool Dresser's Name Sean Hutch

Tool Dresser's Name

Tool Dresser's Name

Contractor's Name TOS

15 14 22

(Section) (Township) (Range)

Distance from S line, 2475 ft.

Distance from E line, 790 ft.

3 Sacks

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
8" Set _____ 8" Pulled _____
7 1/2" Set 22 6 1/4" Pulled _____
4" Set _____ 4" Pulled _____
2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

Table with 6 columns: Feet, In., Feet, In., Feet, In. and rows for casing and tubing measurements with handwritten entries like '831', '863.25', '894.5', 'Seat nipple', 'Baffle', 'Float'.

Thickness of Strata	Formation	Total Depth	Remarks
0-12	Soil-clay	12	
6	Lime	18	
8	Shale	26	
16	Lime	42	
7	Shale	49	
8	Lime	57	
9	Shale	66	
15	Lime	81	
22	Shale	103	
75	Lime	178	
31	Shale	209	
8	Lime	217	
15	Shale	232	
5	Shale & lime	237	
7	Lime	244	
2	Shale	246	
10	Lime	256	
33	Shale	289	
1	Lime	290	
9	Shale	299	
27	Lime	326	
6	Shale	332	
23	Lime	355	
4	Shale	359	
5	Lime	364	
5	Shale	369	
6	Lime	375	

375

Thickness of Strata	Formation	Total Depth	Remarks
54	Shale	429	
41	Sand	470	no Oil
14	Shale	484	
16	Sand	500	no Oil
49	Shale	549	
4	Lime	553	
3	Shale	556	
1	Lime	557	
8	Shale	565	
7	Lime	572	
16	Shale	588	
3	Lime	591	
8	Shale	599	
11	Lime	610	
23	Shale	633	
4	Lime	637	
84	Shale	721	
17	sand	738	no Oil
7	Shale	745	
3	Lime	748	
88	Shale	836	
3	limy sand	839	50% Oil
1	sand	840	50% Oil
5	sand	845	solid Oil
2	limy sand	847	75% Oil
2	sandy shale	849	10% Oil
4	sandy shale	853	no Oil



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 # 247897

Invoice Date: 02/17/2012 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

MC CAM B A-2
36949
SE 15 14 22 JO
2/16/12
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	112.00	10.9500	1226.40
1118B	PREMIUM GEL / BENTONITE	188.00	.2100	39.48
1110A	KOL SEAL (50# BAG)	560.00	.4600	257.60
1111	SODIUM CHLORIDE (GRANULA	235.00	.3700	86.95
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
369 80 BBL VACUUM TRUCK (CEMENT)	2.50	90.00	225.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
495 CASING FOOTAGE	894.00	.00	.00
510 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1682.26 Freight: .00 Tax: 126.59 AR 3533.85
Labor: .00 Misc: .00 Total: 3533.85
Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED

Oil Well Services, LLC

TICKET NUMBER 36949

LOCATION Ottawa, KS

FOREMAN Carey Kennedy

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
2/16/12	3244	McCann B A-2	SE 15	14	22	JO
CUSTOMER <u>Attavista Energy</u>			TRUCK#			
MAILING ADDRESS <u>4593 K-33 Hwy</u>			DRIVER			
CITY <u>Wellsville</u>			TRUCK#			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>66092</u>			TRUCK#			
			DRIVER			

JOB TYPE long string HOLE SIZE 5 5/8" HOLE DEPTH 920' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 894' DRILL PIPE _____ TUBING baffle - 8 1/2" OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" rubber plug
 DISPLACEMENT 5.02 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 5.5 bpm

REMARKS: held safety meeting, established circulation, mixed + pumped 1/2 gal ESA-41 Soap + 1/2 gal HE-150 Polymer followed by 30 bbls fresh water, mixed + pumped 112 sks 50/50 Pozmix cement w/ 2% gel, 5% Salt, + 5# Kol Seal per sk, cement to surface, flushed pump clean, displaced 2 1/2" plug to baffle w/ 5.02 bbls fresh water, pressured to 800 PSI, released pressure, shot in casing.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406	30 mi	MILEAGE		120.00
5402	894'	casing footage		
5407	minimum	ton mileage		350.00
5502C	2.5 hrs	80 Vac		225.00
1124	112 sks	50/50 Pozmix cement		1226.40
1118B	188 #	Premium Gel		39.48
1110A	560 #	Kol Seal		257.60
1111	235 #	Salt		81.95
1143	1/2 gal	ESA-41 Soap		20.20
1401	1/2 gal	HE-150 Polymer		23.63
4402	1	2 1/2" rubber plug		28.00
<u>247897</u>				
			7.525%	SALES TAX
				ESTIMATED TOTAL
				<u>3533.85</u>

Revin 9737

AUTHORIZATION _____

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