



KANSAS CORPORATION COMMISSION 1078310  
OIL & GAS CONSERVATION DIVISION

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 # \_\_\_\_\_

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: \_\_\_\_\_



1078310

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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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Johnson County, KS  
Well: McCann B AI-2  
Lease Owner: Alta Vista

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

Commenced Spudding:  
2/28/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-8	Soil-Clay	8
6	Lime	14
6	Shale	20
17	Lime	37
8	Shale	45
8	Lime	53
9	Shale	62
14	Lime	76
17	Shale	93
2	Lime	95
3	Shale	98
77	Lime	175
32	Shale	207
8	Lime	215
14	Shale	229
5	Shale & Lime	234
7	Lime	241
3	Shale	244
9	Lime	253
33	Shale	286
1	Lime	287
10	Shale	297
26	Lime	323
7	Shale	330
23	Lime	353
4	Shale	357
5	Lime	362
4	Shale	366
7	Lime	373
53	Shale	426
39	Sand	465
16	Shale	481
27	Sand	508
36	Shale	544
5	Lime	549
2	Shale	551
1	Lime	552
11	Shale	563
7	Lime	570
16	Shale	586



McLain B Farm: Johnson County

KS State; Well No. AI-2

Elevation 1031

Commenced Spuding Feb 28 2012

Finished Drilling Feb 29 2012

Driller's Name Wesley Dollard

Driller's Name

Driller's Name

Tool Dresser's Name Sean Hutch

Tool Dresser's Name

Tool Dresser's Name

Contractor's Name TCS

15 14 22

(Section) 5 (Township) (Range) 2475 ft.

Distance from E line, 490 ft.

8 hrs

3 sacks

**CASING AND TUBING RECORD**

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_  
 8" Set \_\_\_\_\_ 8" Pulled \_\_\_\_\_  
 7 3/4" Set 24 6 1/4" Pulled \_\_\_\_\_  
 4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_  
 2" Set \_\_\_\_\_ 2" Pulled \_\_\_\_\_

**CASING AND TUBING MEASUREMENTS**

Feet	In.	Feet	In.	Feet	In.
868.	45	Baffle			
900.	15	Float			

Thickness of Strata	Formation	Total Depth	Remarks
0-8	soil-clay	8	
6	Lime	14	
6	shale	20	
17	Lime	37	
8	shale	45	
8	Lime	53	
9	shale	62	
14	Lime	76	
17	shale	93	
2	Lime	95	
3	shale	98	
77	Lime	175	
32	shale	207	
8	Lime	215	
14	shale	229	
5	shale & lime	234	
7	Lime	241	
3	shale	244	
9	Lime	253	
33	shale	286	
1	Lime	287	
10	shale	297	
26	Lime	323	
7	shale	330	
23	Lime	353	
4	shale	357	
5	Lime	362	

362

Thickness of Strata	Formation	Total Depth	Remarks
4	Shale	366	
7	Lime	373	
53	shale	426	
39	sand	465	no Oil
16	shale	481	
27	sand	508	no Oil
36	shale	544	
5	Lime	549	
2	shale	551	
1	Lime	552	
11	shale	563	
7	Lime	570	
16	Shale	586	
3	Lime	589	
7	Shale	596	
10	Lime	606	
25	shale	631	
2	Lime	633	
75	Shale	708	
26	sand	734	good odor no show
8	shale	742	
2	Lime	744	
88	shale	832	
3	sand	835	broken 50% Oil
3	limey sand	838	no Oil
1	limey sand	839	broken 50% Oil
3	sand	842	Solid Oil

842

Thickness of Strata	Formation	Total Depth	Remarks
2	Sand	844	20% Oil
13	Sandy shale	857	no Oil
63	shale	920	TD





**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 # 248129

Invoice Date: 02/29/2012 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 AI2  
34210  
SE 15 14 22 JO  
2/29/12  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	139.00	10.9500	1522.05
1118B	PREMIUM GEL / BENTONITE	334.00	.2100	70.14
1111	SODIUM CHLORIDE (GRANULA	269.00	.3700	99.53
1110A	KOL SEAL (50# BAG)	695.00	.4600	319.70
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	1030.00	1030.00
368 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
368 CASING FOOTAGE	900.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
503 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 2083.25 Freight: .00 Tax: 156.77 AR 3920.02  
 Labor: .00 Misc: .00 Total: 3920.02  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 34210

LOCATION Ottawa

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
2-29-12	3244	McCann AT-2	SE 15	14	22	J8
CUSTOMER <u>Altawista Energy</u>			TRUCK #			
MAILING ADDRESS <u>P.O. Box 128</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 7/8 HOLE DEPTH 915 CASING SIZE & WEIGHT 2 1/2  
 CASING DEPTH 900 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER baffle 868  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING yes  
 DISPLACEMENT 3/4 DISPLACEMENT PSI 2000 MIX PSI 200 RATE 4 bpm

REMARKS: held crew meet. Established rate. Mixed + pumped  
1/2 gal ESA41 + 1/2 gal HE 100. Circulated into clean pit.  
Mixed + pumped 100 # gel to condition well followed  
by 134 sk 50150 cem plus 5% salt, 5# Kolseal, 2% gel  
per sack. Circulated cement. Flushed pump. Hooked to  
well. Attempted to pump plug to baffle. Well flashed.  
pressured up to 2000 PSI. Closed valve. Pumped 5 sk  
cement to fill area around well. left plug app. 140' down.

TOS, Wes

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406	30	MILEAGE		120.00
5402	900	casing footage		—
5407	min	ton miles		350.00
5502C	2	80 vac		180.00
1124	139 sk	50150 cem		1522.05
1118B	334 #	gel		70.14
1111	269 #	salt		99.53
1110A	695 #	Kolseal		319.70
1143	1/2 gal	ESA41		20.20
1401	1/2 gal	HE-100		23.63
4402	1	2 1/2 plug		28.00
				24812.9
SALES TAX				156.77
ESTIMATED TOTAL				3920.02

Flavin 3737

AUTHORIZATION Jim Hoehn was there 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