



**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: \_\_\_\_\_



1079945

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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

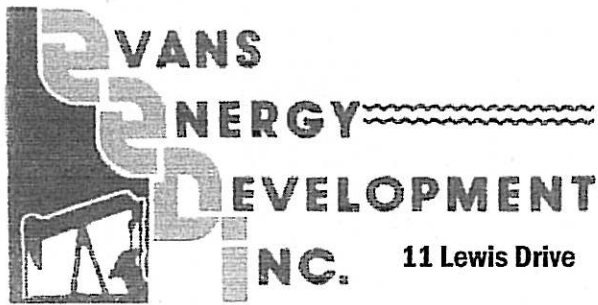
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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) (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.

Guetterman #AI-4

API # 15-091-23,505

January 17 - January 20, 2012

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
12	soil & clay	12
5	sandstone	17
33	shale	50
5	lime	55
13	shale	68
18	lime	86
9	shale	95
10	lime	105
2	shale	107
20	lime	127
18	shale	145
20	lime	165
8	shale	173
47	lime	220
24	shale	244
7	lime	251
20	shale	271
6	lime	277
8	shale	285
8	lime	293
3	shale	296
4	lime	300
35	shale	335
28	lime	363
6	shale	369
20	lime	389
4	shale	393
15	lime	408 base of the Kansas City
174	shale	582
5	lime	587
16	shale	603
4	lime	607
16	shale	623
3	lime	626
5	shale	631
11	lime	642
62	shale	704
4	lime	708

36	shale	744
9	broken sand	753 brown & grey sand, lite bleeding
113	shale	866
3.5	broken sand	869.5 brown & white sand, 80% oil sand bleeding
3	oil sand	872.5 black, good sand, good bleeding
2.5	broken sand	875 brown & grey sand, 60% oil sand bleeding
3	silty shale	878
57	shale	935 TD

Drilled a 9 7/8" hole to 21.4'

Drilled a 5 5/8" hole to 935'

Set 21.5' of 7" surface casing cemented with 5 sacks of cement.

Set 925' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp, and 1 baffle.

	Core Times	
	<u>Minutes</u>	<u>Seconds</u>
867		49
868	1	10
869		39
870	1	9
871		48
872		54
873		22
874		30
875		34
876		36
877		42
878		40
879	1	15
880		57
881		34
882		50



**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 # 247383

Invoice Date: 01/26/2012 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

GUETTERMAN AI-4  
36881  
NW 20 14 22 JO  
01/20/12  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	131.00	10.9500	1434.45
1118B	PREMIUM GEL / BENTONITE	212.00	.2100	44.52
1111	SODIUM CHLORIDE (GRANULA	299.00	.3700	110.63
1110A	KOL SEAL (50# BAG)	655.00	.4600	301.30
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
1401	HE 100 POLYMER	.50	47.2500	23.63
1143	SILT SUSPENDER SS-630, ES	.50	40.4000	20.20

Description	Hours	Unit Price	Total
369 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
495 CASING FOOTAGE	925.00	.00	.00
548 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1962.73 Freight: .00 Tax: 147.69 AR 3790.42  
Labor: .00 Misc: .00 Total: 3790.42  
Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

PONCA CITY, OK  
580/762-2303

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

GILLETTE, WY  
307/686-4914



**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 36881  
LOCATION Ottawa, KS  
FOREMAN Jim Green

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
01-20-12	3244	Cartman # A19	NW 20	19	22	DO
CUSTOMER		Always Energy				
MAILING ADDRESS		4895 Hwy 37				
CITY	STATE	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
Wellsville	KS	66092	669	Jim Green JG		
			495	Casper Kowalski C/C		
			369	Mark Miller DM		
			528	Kit Car KC		

JOB TYPE Long string HOLE SIZE 5 7/8" HOLE DEPTH 935 CASING SIZE & WEIGHT 2 7/8"  
CASING DEPTH 925' DRILL PIPE Baffle tubing at 895' OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Establish circulation, mix and pump 1/2 GAL EPA-41 & 1/2 GAL HE150 Polymer Flush Circulate to condition hole. Mix and pump 131 CK 5030 POC Mix Cement 5" KOL-seal, 5% SALT, 296 lbs. Circulate cement to surface. Flush Pump Clean. Pump 2 1/2" rubber plug to TD. Pressure well up to 800 PSI. Hold good set & float. Close Valve.

Evans Energy (Travis) Jim Green

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5402	One	PUMP CHARGE Cement one well		1030.00
5406	30	MILEAGE		120.00
5402	925'	Casing footage		N/C
5407	12.5	Tax Mileage		350.00
5402C	2 HRS	Due TK		180.00
1124	131.5 lb	5030 POC Mix Cement		1434.95
1118B	212.4	Premium Gal		44.52
1111	299.2	Granulated Salt		1106.32
1110A	655.4	KOL-seal		301.90
4402	One	2 1/2" Rubber Plug		28.00
1401	1/2 Gal	HE100 Polymer		23.62
1143	1/2 Gal	EPA-41		20.70
	24738.3			
			SALES TAX	147.69
			ESTIMATED TOTAL	3790.42

Rev'n 3737

AUTHORIZATION \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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