



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



1079948

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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Johnson County, KS  
Well: Guetterman AI-6  
Lease Owner: Alta Vista

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

Commenced Spudding:  
3/29/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-14	Soil-Clay	14
5	Shale	19
5	Lime	24
14	Shale	38
12	Lime	50
4	Shale	54
16	Lime	70
9	Shale	79
8	Lime	87
5	Shale	92
1	Lime	93
4	Shale	97
18	Lime	115
18	Shale	133
19	Lime	152
5	Shale	157
50	Lime	207
22	Shale	229
9	Lime	238
15	Shale	253
9	Lime	262
7	Shale	269
18	Lime	287
34	Shale	321
25	Lime	346
7	Shale	353
23	Lime	376
4	Shale	380
4	Lime	384
3	Shale	387
7	Lime	394
104	Shale	498
22	Sandy Shale	520
25	Shale	545
3	Lime	548
18	Shale	566
5	Lime	571
15	Shale	586
3	Lime	589
19	Shale	608





Thickness of Strata	Formation	Total Depth	Remarks
0-14	Soil-clay	14	
5	Shale	19	
5	Lime	24	
14	Shale	38	
12	Lime	50	
4	Shale	54	
16	Lime	70	
9	Shale	79	
8	Lime	87	
5	Shale	92	
1	Lime	93	
4	Shale	97	
18	Lime	115	
18	Shale	133	
19	Lime	152	
5	Shale	157	
50	Lime	207	
22	Shale	229	
9	Lime	238	
15	Shale	253	
9	Lime	262	
7	Shale	269	
18	Lime	287	
34	Shale	321	
25	Lime	346	
7	Shale	353	
23	Lime	376	

376

Thickness of Strata	Formation	Total Depth	Remarks
4	shale	380	
4	lime	384	
3	shale	387	
7	lime	394	
104	shale	498	
22	sandy shale	520	
25	shale	545	
3	lime	548	
18	shale	566	
5	lime	571	
15	shale	586	
3	lime	589	
14	shale	603	
4	lime	617	
5	shale	621	
4	lime	621	
105	shale	726	
10	sand	736	no show
10	sandy shale	746	
11	shale	757	
3	lime	760	
90	shale	850	
2	lime	852	no oil
2	lime & sand	854	oil in sand
4	sand	858	solid oil
1	sand	859	5% oil
10	sandy shale	869	no oil
51	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 # 248813

Invoice Date: 04/05/2012 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-6  
36564  
NE 19 14 22 JO  
4/2/12  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	143.00	10.9500	1565.85
1118B	PREMIUM GEL / BENTONITE	340.00	.2100	71.40
1111	SODIUM CHLORIDE (GRANULA	277.00	.3700	102.49
1110A	KOL SEAL (50# BAG)	715.00	.4600	328.90
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
1401	HE 100 POLYMER	1.00	47.2500	47.25

Description	Hours	Unit Price	Total
369 80 BBL VACUUM TRUCK (CEMENT)	3.00	90.00	270.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
495 CASING FOOTAGE	915.00	.00	.00
503 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 2143.89 Freight: .00 Tax: 161.33 AR 4075.22  
 Labor: .00 Misc: .00 Total: 4075.22  
 Sublt: .00 Supplies: .00 Change: .00

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





**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 36564

LOCATION Ottawa KS

FOREMAN Fred Maden

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
4/2/12	3244	Guetterman #A2-6	NE 19	14	22	JO
CUSTOMER <u>Altavista Energy</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>4595 Niway 33</u>			<u>506</u>	<u>FREMAD</u>	<u>Sally</u>	<u>MJ</u>
CITY <u>Wellsville</u>			<u>495</u>	<u>HARBEC</u>	<u>HB</u>	
STATE <u>KS</u>	ZIP CODE <u>66092</u>		<u>369</u>	<u>DERMA</u>	<u>DM</u>	
			<u>503</u>	<u>DANBAR</u>	<u>DB</u>	

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 2 7/8 EUE  
 CASING DEPTH 945 DRILL PIPE Baffle tubing @ 886 OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2" Plug 29'  
 DISPLACEMENT 5.15 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Wash down 8 JTs 2 7/8" Casing. Mix + Pump 1 Gal HE-100 Polymer  
Flush. Circulate hole for conditioning. Mix + Pump 100#  
Premium Gel. Mix + Pump 143 sks 50/50 Poz Mix Cement  
2 1/2" Gel 5% Salt 5# Kol Seal/sk. Cement to surface. Flush  
Pump + lines clean. Displace 2 1/2" Rubber plug to  
baffle in casing @ pressure to 800# PSI. Release  
pressure to set float valve. Shut in casing.

TOS Drilling - (wes)

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 <sup>00</sup>
5406	30 mi	MILEAGE	495	120 <sup>00</sup>
5402	945	Casing footage		N/C
5407	Minimum	Ton Miles.	503	350 <sup>00</sup>
5502C	3 hrs	80 BBL Vac Truck	369	270 <sup>00</sup>
1124	143 sks	50/50 Poz Mix Cement		1565 <sup>80</sup>
118B	340#	Premium Gel		71 <sup>40</sup>
1111	277#	Granulated Salt		102 <sup>49</sup>
1110A	715#	Kol Seal		328 <sup>90</sup>
4402	1	2 1/2" Rubber Plug		28 <sup>00</sup>
1451	1 Gal	HE-100 Polymer		47 <sup>25</sup>
<u>248813</u>				
			<u>7.25%</u>	SALES TAX
				ESTIMATED TOTAL
				<u>16133</u>
				<u>4075<sup>22</sup></u>

Ravin 3737

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.