



KANSAS CORPORATION COMMISSION 1079950
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: _____



1079950

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Johnson County, KS
Well: Guetterman AI-8
Lease Owner: Alta Vista

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

Commenced Spudding:
3/28/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-27	Soil-Clay	27
3	Lime	30
10	Shale	40
16	Lime	56
10	Shale	66
8	Lime	74
4	Shale	78
1	Lime	79
4	Shale	83
19	Lime	102
18	Shale	120
19	Lime	139
6	Shale	145
50	Lime	195
22	Shale	217
9	Lime	226
16	Shale	242
8	Lime	250
7	Shale	257
18	Lime	275
35	Shale	310
24	Lime	334
6	Shale	340
24	Lime	364
4	Shale	368
4	Lime	372
3	Shale	375
7	Lime	382
102	Shale	484
23	Sandy Shale	507
26	Shale	533
4	Lime	537
16	Shale	553
5	Lime	558
15	Shale	573
6	Lime	579
15	Shale	594
3	Lime	597
5	Shale	602
4	Lime	606

Thickness of Strata	Formation	Total Depth	Remarks
0-27	soil-clay	27	
3	Lime	30	
10	Shale	40	
16	Lime	56	
10	Shale	66	
8	Lime	74	
4	shale	78	
1	Lime	79	
4	Shale	83	
19	Lime	102	
18	Shale	120	
19	Lime	139	
6	Shale	145	
50	Lime	195	
22	Shale	217	
9	Lime	226	
16	Shale	242	
8	Lime	250	
7	shale	257	
18	Lime	275	
35	Shale	310	
24	Lime	334	
6	Shale	340	
24	Lime	364	
4	Shale	368	
4	Lime	372	
3	Shale	375	

375

Thickness of Strata	Formation	Total Depth	Remarks
7	Lime	382	
102	shale	484	
23	sandy shale	507	
26	shale	533	
4	Lime	537	
16	shale	553	
5	Lime	558	
15	shale	573	
6	Lime	579	
15	shale	594	
3	Lime	597	
5	shale	602	
4	Lime	606	
27	shale	633	
5	Lime	638	
74	shale	712	
9	sand	721	no show
9	sandy shale	730	
14	shale	744	
3	Lime	747	
88	shale	835	
1	limey sand	836	laminated 50% oil
3	sand	839	solid oil
3	broken sand	842	oil
8	sandy shale	850	no oil
70	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 # 248754

Invoice Date: 03/31/2012 Terms: 0/0/30,n/30

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ALTAVISTA ENERGY INC
4595 K-33 HIGHWAY
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

GUETTERMAN AI-8
36595
NE 19 14 22 JO
3/29/12
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	119.00	10.9500	1303.05
1118B	PREMIUM GEL / BENTONITE	300.00	.2100	63.00
1111	SODIUM CHLORIDE (GRANULA	250.00	.3700	92.50
1110A	KOL SEAL (50# BAG)	595.00	.4600	273.70
1401	HE 100 POLYMER	1.00	47.2500	47.25
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
495 CASING FOOTAGE	901.00	.00	.00
T-106 WATER TRANSPORT (CEMENT)	2.00	112.00	224.00
558 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts:	1807.50	Freight:	.00	Tax:	136.02	AR	3667.52
Labor:	.00	Misc:	.00	Total:	3667.52		
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

