



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: _____



1080092

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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Franklin County, KS
Well: Bivins AI-23
Lease Owner: Alta Vista

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

Commenced Spudding:
1/16/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-21	Soil-Clay	21
27	Lime	48
7	Shale	55
10	Lime	65
3	Shale	68
20	Lime	88
54	Shale	142
3	Lime	145
4	Shale	149
26	Lime	175
49	Shale	224
22	Lime	246
25	Shale	271
6	Lime	277
16	Shale	293
6	Sand	299
12	Lime	311
10	Shale	321
2	Lime	323
15	Shale	338
23	Lime	361
9	Shale	370
22	Lime	392
5	Shale	397
4	Lime	401
3	Shale	404
6	Lime	410
5	Shale	415
1	Lime	416
5	Sandy Shale	421
35	Shale	456
10	Sand	466
52	Shale	518
8	Sand	526
32	Shale	558
5	Lime	563
7	Shale	570
9	Lime	579
7	Shale	586
8	Lime	594

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

Commenced Spudding:
1/16/2012

2	Shale	596
4	Coal	600
2	Shale	602
7	Lime	609
14	Shale	623
3	Lime	626
3	Coal	629
5	Shale	634
4	Lime	638
2	Shale	640
9	Lime	649
13	Shale	662
5	Lime	667
17	Sand	684
30	Sandy Shale	714
1	Lime	715
7	Shale	722
1	Lime	723
1	Shale	724
1	Sand	725
1	Sand	726
19	Core	745
34	Shale	779
4	Lime	783
7	Shale	790
2	Lime	792
7	Shale	799-TD

Divins Farm: Franklin County

KS State; Well No. AJ-23

Elevation 9164

Commenced Spuding Jan 16 20 12

Finished Drilling Jan 18 20 12

Driller's Name Wesley Dollard

Driller's Name _____

Driller's Name _____

Tool Dresser's Name Brindon Stove

Tool Dresser's Name _____

Tool Dresser's Name _____

Contractor's Name TOS

16 16 21

(Section) S (Township) 1445 (Range) _____
Distance from _____ line, _____ ft.

Distance from E line, 3830 ft.

1 CORE

12 hrs

3 sacks

**CASING AND TUBING
RECORD**

10" Set _____ 10" Pulled _____

8" Set _____ 8" Pulled _____

7 1/2" Set 22' 6 1/2" Pulled _____

4" Set _____ 4" Pulled _____

2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
<u>742</u>		<u>Baffle</u>			
<u>778</u>		<u>TOTAL</u>		<u>278</u>	

Thickness of Strata	Formation	Total Depth	Remarks
0-21	soil-clay	21	
27	Lime	48	
7	Shale	55	
10	Lime	65	
3	Shale	68	
20	Lime	88	
54	Shale	142	
3	Lime	145	
4	Shale	149	
26	Lime	175	
49	Shale	224	
22	Lime	246	
25	Shale	271	
6	Lime	277	
16	Shale	293	
6	Sand	299	no oil
12	Lime	311	
10	Shale	321	
2	Lime	323	
15	Shale	338	
23	Lime	361	
9	Shale	370	
22	Lime	392	
5	Shale	397	
4	Lime	401	
3	Shale	404	
6	Lime	410	

410

Thickness of Strata	Formation	Total Depth	Remarks
5	Shale	415	
1	Lime	416	
5	Sandy shale	421	
35	shale	456	
10	sand	466	no O.I
52	shale	518	
8	sand	526	no O.I
32	shale	558	
5	Lime	563	
7	shale	570	
9	Lime	579	
7	shale	586	
8	Lime	594	
2	shale	596	
4	coal	600	
2	shale	602	
7	Lime	609	
14	shale	623	
3	Lime	626	
3	coal	629	
5	shale	634	
4	Lime	638	
2	shale	640	
9	Lime	649	
13	shale	662	
5	Lime	667	
17	Sand	684	50-60% O.I OK Hard

684

Thickness of Strata	Formation	Total Depth	Remarks
30	sandy shale	714	
1	Lime	715	
7	shale	722	
1	Lime	723	
1	shale	724	
1	sand	725	no oil
1	sand	726	solid Oil
19	CORSE	745	
34	shale	779	
4	Lime	783	
7	shale	790	
2	Lime	792	
7	shale	799	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 # 247377

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

BIVENS AI-23
36858
SW 18 FR
01/18/12
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
1111	SODIUM CHLORIDE (GRANULA	216.00	.3700	79.92
1110A	KOL SEAL (50# BAG)	560.00	.4600	257.60
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
1143	SILT SUSPENDER SS-630,ES	.50	40.4000	20.20
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
370 80 BBL VACUUM TRUCK (CEMENT)	1.50	90.00	135.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	20.00	4.00	80.00
495 CASING FOOTAGE	772.00	.00	.00
503 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1675.23 Freight: .00 Tax: 130.66 AR 3400.89
 Labor: .00 Misc: .00 Total: 3400.89
 Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 36858

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
1/18/12	3244	Bivens # AI-23	SW 18			FR
CUSTOMER <u>Altavista Energy</u>			TRUCK #			
MAILING ADDRESS <u>4595 Hiway 33</u>			DRIVER			
CITY <u>Wellsville</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>66092</u>			TRUCK #			
			DRIVER			
			TRUCK #			
			DRIVER			
			TRUCK #			
			DRIVER			

JOB TYPE logstring HOLE SIZE _____ HOLE DEPTH 799' CASING SIZE & WEIGHT 2 7/8" x 45'
 CASING DEPTH 772' DRILL PIPE Baffle In TUBING @ 741 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 1/2" Plug + 31'
 DISPLACEMENT 4.3 B DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Establish Circulation. Mix & Pump 1/2 Gal ESA-41 + 1/2 Gal HE-150
Polymer Flush. Circulate to condition hole. Mix & Pump 112 SKS
50/50 Por mix Cement 2 3/4 Gal 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 (was)

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1020 ⁰⁰
5406	20 mi	MILEAGE	495	80 ⁰⁰
5402	772'	Casing footage		N/C
5407	Minimum	Ten Miles.	503	350 ⁰⁰
15502C	1 1/2 hr	80 BBL Vac Truck	370	185 ⁰⁰
1124	112 SKS	50/50 Por mix Cement		1226 ⁴⁰
1118B	188#	Premium Gel		39 ⁴⁸
1111	216#	Granulated Salt		79 ⁹²
1110A	560#	KOL Seal		257 ⁶⁰
4402	1	2 1/2" Rubber Plug		28 ⁰⁰
1143	1/2 Gal	ESA-41		20 ³⁰
1401	1/2 Gal	HE 150 Polymer		23 ⁶³
<u>247377</u>				
			7.8%	SALES TAX
				ESTIMATED
				TOTAL
				130 ⁶⁴
				3400 ⁸⁹

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 for