



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
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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: _____



1091584

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Douglas County, KS
Well: Johnson A-40
Lease Owner: AltaVista

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

Commenced Spudding:
7/6/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-29	Soil-Clay	29
117	Shale	146
5	Lime	151
6	Shale	157
15	Lime	172
8	Shale	180
7	Lime	187
5	Shale	192
26	Lime	218
22	Shale	240
18	Lime	258
74	Shale	332
23	Lime	355
13	Shale	368
6	Shale & Lime	374
7	Lime	381
15	Shale	396
3	Sand	399
8	Shale	407
16	Lime	423
6	Shale	429
2	Lime	431
10	Shale	441
23	Lime	464
8	Shale	472
24	Lime	496
5	Shale	501
4	Lime	505
3	Shale	508
7	Lime	515
145	Shale	660
5	Lime	665
21	Shale	686
6	Lime	692
21	Shale	713
6	Lime	719
16	Shale	735
1	Lime	736
12	Shale	748
4	Lime	752

Short Cuts

TANK CAPACITY

BBLs. (42 gal.) equals $D^2 \times 14 \times h$

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

* D - Diameter of Pump Sheave

* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

BELT LENGTH - $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

* Need these to figure belt length

TO FIGURE AMPS: $\frac{WATTS}{VOLTS} = AMPS$

746 WATTS equal 1 HP

Log Book

Well No. A-40

Farm Johnson

KS Douglas
(State) (County)

1 15 20
(Section) (Township) (Range)

For Altavista Energy
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

Johnson Farm: Douglas County
 KS State; Well No. A-40
 Elevation 1031
 Commenced Spudding July 6 2012
 Finished Drilling July 10 2012
 Driller's Name Wesley Dollard
 Driller's Name _____
 Driller's Name _____
 Tool Dresser's Name Ryan Ward
 Tool Dresser's Name Colt Stone
 Tool Dresser's Name _____
 Contractor's Name TOS
 _____ 1 _____ 15 _____ 20

(Section) (Township) (Range)
 Distance from S line, 2805 ft.
 Distance from E line, 2805 ft.

4 sacks
 1 core
 14 hrs

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
 8" Set _____ 8" Pulled _____
~~7~~ 6 3/4" Set 44 6 3/4" Pulled _____
 4" Set _____ 4" Pulled _____
 2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
784.3		Seat	ripping		
816		Baffle			
846		Float	2 7/8		

Thickness of Strata	Formation	Total Depth	Remarks
0-29	soil-clay	29	
117	Shale	146	
5	Lime	151	
6	Shale	157	
15	Lime	172	
9	Shale	180	
7	Lime	187	
5	Shale	192	
26	Lime	218	
22	Shale	240	
18	Lime	258	
74	Shale	332	
23	Lime	355	
13	Shale	368	
6	Shale & Lime	374	
7	Lime	381	
15	Shale	396	
3	Sand	399	no Oil
8	Shale	407	
16	Lime	423	
6	Shale	429	
2	Lime	431	
10	Shale	441	
23	Lime	464	
8	Shale	472	
24	Lime	496	
5	Shale	501	

501st

Thickness of Strata	Formation	Total Depth	Remarks
4	Lime	505	
3	Shale	508	
7	Lime	515	Hertha
145	Shale	660	
5	Lime	665	
21	Shale	686	
6	Lime	692	
21	Shale	713	
6	Lime	719	
16	Shale	735	
1	Lime	736	
12	Shale	748	
4	Lime	752	
2	Shale	754	
3	Lime	757	
3	Shale & lime	760	
20	Shale	780	
9	Shale & lime	789	
2	Sandy shale	791	no Oil
2	sand	793	2% Oil - Odor - perf
18	Core	811	
69	sandy shale	880	TD

CORE

Thickness of Strata	Formation	Total Depth	Remarks
		793	
.5	sand-perf	793.5	solid oil
1.5	sand	795	no Oil
7	sand-perf	802	solid oil - good saturation
6	sand	808	no Oil
3	sandy shale	811	no Oil



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 # 251201

Invoice Date: 07/13/2012 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

JOHNSON A-40
37416
1-15-20
07-10-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	104.00	10.9500	1138.80
1118B	PREMIUM GEL / BENTONITE	275.00	.2100	57.75
1111	SODIUM CHLORIDE (GRANULA	201.00	.3700	74.37
1110A	KOL SEAL (50# BAG)	520.00	.4600	239.20
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)	25.00	4.00	100.00
368 CASING FOOTAGE	846.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
548 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1561.75 Freight: .00 Tax: 114.01 AR 3335.76
 Labor: .00 Misc: .00 Total: 3335.76
 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 37416
LOCATION Off 409
FOREMAN Alan Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-10-12	3244	Johnson A-40	NW 1	15	20	D6

CUSTOMER <u>Altavista Energy</u>		
MAILING ADDRESS <u>P.O. Box 128</u>		
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66092</u>

TRUCK #	DRIVER	TRUCK #	DRIVER
<u>516</u>	<u>Alan Mader</u>	<u>Safety</u>	<u>Meed</u>
<u>368</u>	<u>Art McD</u>	<u>AKW</u>	
<u>370</u>	<u>Kei Car</u>	<u>KC</u>	
<u>548</u>	<u>Mik Hagg</u>	<u>MK</u>	

JOB TYPE <u>long string</u>	HOLE SIZE <u>5 5/8</u>	HOLE DEPTH <u>980</u>	CASING SIZE & WEIGHT <u>2 7/8</u>
CASING DEPTH <u>846</u>	DRILL PIPE	TUBING	OTHER <u>816 baffle</u>
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>yes</u>
DISPLACEMENT <u>4 3/4</u>	DISPLACEMENT PSI <u>800</u>	MIX PSI <u>200</u>	RATE <u>4 bpm</u>

REMARKS: Held crew meet. Established rate. Mixed & pump 1/2 gal polymer followed by 100# gel. Mixed & pump 104 sk 50/50 cement plus 5# kol seal, 5% salt & 2% gel. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 PSI. Set float. Closed valve.

TOG, Was

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
<u>5401</u>	<u>1</u>	<u>PUMP CHARGE</u>		<u>1030.00</u>
<u>5406</u>	<u>125</u>	<u>MILEAGE</u>		<u>100.00</u>
<u>5402</u>	<u>846</u>	<u>casing footage</u>		<u>—</u>
<u>5407</u>	<u>min</u>	<u>ten miles</u>		<u>350.00</u>
<u>5502L</u>	<u>2</u>	<u>80 val</u>		<u>180.00</u>
<u>1124</u>	<u>104 sk</u>	<u>50/50 cem</u>		<u>1138.80</u>
<u>1118B</u>	<u>275#</u>	<u>gel</u>		<u>57.75</u>
<u>111</u>	<u>201#</u>	<u>salt</u>		<u>74.37</u>
<u>1110A</u>	<u>520#</u>	<u>kol seal</u>		<u>239.20</u>
<u>1401</u>	<u>1/2 gal</u>	<u>polymer</u>		<u>23.63</u>
<u>4402</u>	<u>1</u>	<u>2 1/2 plug</u>		<u>28.00</u>

Completed

SALES TAX 114.01
ESTIMATED TOTAL 3335.76

AUTHORIZATION Jim DKR 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.

25/201