



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: _____



1095803

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: Narrow Tree AI-1
 Lease Owner: AltaVista

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

Commenced Spudding:
 9/4/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
4	Soil-Clay	4
49	Red Sand	53
32	White Sand	85
51	Shale	136
25	Lime	161
6	Shale	167
9	Lime	176
7	Shale	183
23	Lime	206
20	Shale	226
19	Lime	245
11	Shale	256
14	Lime	270
27	Shale	297
15	Lime	312
16	Shale	328
11	Lime	339
25	Shale	354
8	Lime	362
11	Shale	373
11	Lime	384
34	Shale	418
24	Lime	442
6	Shale	448
24	Lime	472
5	Shale	477
4	Lime	481
5	Shale	486
4	Lime	490
175	Shale	665
3	Lime	668
2	Shale	670
6	Lime	676
6	Shale	682
4	Lime	686
4	Shale	690
5	Sand	695
133	Shale	828
6	Sand	834
3	Sandy Shale	837

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 - $\text{RPM} \times d$ over $\text{SPM} \times R$

d - $\text{SPM} \times R \times D$ over RPM

SPM - $\text{RPM} \times D$ over $R \times d$

R - $\text{RPM} \times D$ over $\text{SPM} \times d$

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

* Need these to figure belt length

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

746 WATTS equal 1 HP

Log Book

Well No. A1-1

Farm Newnow Trice

KS Johnson
(State) (County)

25 14 21
(Section) (Township) (Range)

For Alexister Energy
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East
Louisburg, KS 66053
913-710-5400

Thickness of Strata	Formation	Total Depth	Remarks
4	soil/clay	4	
49	red sand	53	water 30
32	white sand	85	
51	shale	136	
25	Lime	161	
6	shale	167	
9	Lime	176	
7	shale	183	
23	Lime	206	
20	shale	226	
19	Lime	245	
11	shale	256	
14	Lime	270	
27	shale	297	
15	Lime	312	
16	shale	328	
11	Lime	339	
15	shale	354	
8	Lime	362	
11	shale	373	
11	Lime	384	
34	shale	418	
24	Lime	442	
6	shale	448	
24	Lime	472	
5	shale	477	
4	Lime	481	



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 # 252656

Invoice Date: 09/11/2012 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

NARROW TREE AI-1
39612
25-14-21
09-04-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	35.00	10.9500	383.25
1118B	PREMIUM GEL / BENTONITE	59.00	.2100	12.39
1111	SODIUM CHLORIDE (GRANULA	68.00	.3700	25.16
1110A	KOL SEAL (50# BAG)	175.00	.4600	80.50
Description		Hours	Unit Price	Total
368	CEMENT PUMP (SURFACE)	1.00	825.00	825.00
368	EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
368	CASING FOOTAGE	102.00	.00	.00
369	80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
548	MIN. BULK DELIVERY	1.00	350.00	350.00

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Parts: 501.30 Freight: .00 Tax: 37.72 AR 2014.02
Labor: .00 Misc: .00 Total: 2014.02
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 39612

LOCATION Ottawa

FOREMAN Alan 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
9-7-12	3244	Narrow Trench - 1	NF 25	14	21	JS
CUSTOMER <u>Altavista Energy</u>			TRUCK #			
MAILING ADDRESS <u>P.O. Box 128</u>			DRIVER			
CITY <u>Wellsville</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>66092</u>			TRUCK #			
JOB TYPE <u>Surface</u>			DRIVER			
HOLE SIZE <u>9 1/2</u>			TRUCK #			
HOLE DEPTH <u>110</u>			DRIVER			
CASING SIZE & WEIGHT <u>7</u>			TRUCK #			
CASING DEPTH <u>102</u>			DRIVER			
DRILL PIPE			TRUCK #			
TUBING			DRIVER			
OTHER			TRUCK #			
SLURRY WEIGHT			DRIVER			
SLURRY VOL			TRUCK #			
WATER gal/sk			DRIVER			
CEMENT LEFT in CASING <u>yes</u>			TRUCK #			
DISPLACEMENT <u>4 1/4</u>			DRIVER			
DISPLACEMENT PSI <u>200</u>			TRUCK #			
MIX PSI <u>-</u>			DRIVER			
RATE <u>4 bpm</u>			TRUCK #			
REMARKS: <u>Held crew meet. Established rate. Mixed & pumped 35 sk 50 150 cement plus 5# 50 seal, 5# 20 salt, 2# 20 gel per sack. Circulated cement. Displaced casing with clean water.</u>						

TDS, Chad

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	360	825.00
5406	30	MILEAGE	368	120.00
5402	102'	casing footage	368	-
5407	min	ten miles	548	350.00
55026	2	80 gal	365	180.00
1124	35	50 150 cement		383.25
1118B	59 #	gel		12.39
1111	68 #	salt		25.16
1110A	175 #	50 seal		80.50
SCANNED				
Completed				
SALES TAX ESTIMATED TOTAL				37.12
TOTAL				2014.02

Ravin 3737

no company rep
Jim Okid

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

252656



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 # 252673

Invoice Date: 09/11/2012 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

NARROW TREE AI-1
39633
25-14-21
09-06-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	61.00	10.9500	667.95
1118B	PREMIUM GEL / BENTONITE	307.00	.2100	64.47
Description		Hours	Unit Price	Total
368	P & A NEW WELL	1.00	1030.00	1030.00
368	EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
369	80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
548	MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 732.42 Freight: .00 Tax: 55.11 AR 2467.53
Labor: .00 Misc: .00 Total: 2467.53
Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 39633

LOCATION Ottawa

FOREMAN Alan Maden

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-6-12	3244	Narrow Tree A1	NE 25	14	31	Go
CUSTOMER Altavista Energy			TRUCK #			
MAILING ADDRESS P.O. Box 128			DRIVER			
CITY Wellsville		STATE KS	ZIP CODE 66092	TRUCK #		
JOB TYPE <u>plug</u>		HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>966</u>	CASING SIZE & WEIGHT		
CASING DEPTH		DRILL PIPE	TUBING <u>1" 966</u>	OTHER		
SLURRY WEIGHT		SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING		
DISPLACEMENT		DISPLACEMENT PSI	MIX PSI	RATE <u>1 bpm</u>		
REMARKS: <u>Held crew meet. Washed 1" tubing to hole TD. Mixed & pumped 10 SK 50/50 cement plus 6% gel for 50" plug @ TD. Pulled 1" to 500'. Mixed & pumped 10 sk. Pulled 1" to 350' & filled to surface with 41 3/4 sk cement. Pulled 1" out & topped off hole.</u>						
<u>61 sk total</u>						
<u>Tos Slim & Chad</u>						
<u>Alan Maden</u>						

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405A	1	PUMP CHARGE	368	1030.00
5406	30	MILEAGE	368	120.00
5407	mi	ten miles	548	330.00
5502 C	2	80 gal	369	180.00
1124	61	50/50 cement		1067.95
1118B	307	gel		64.47
				SALES TAX
				ESTIMATED TOTAL

Flavin 3737 No company rep. AUTHORIZATION Jim OK'd 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.

252673