

Kansas Corporation Commission Oil & Gas Conservation Division

1100508

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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R 🗌 East 🗌 West
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
□ Oil □ WSW □ SIOW □ Gas □ D&A □ ENHR □ SIGW □ OG □ GSW □ Temp. Abd. □ CM (Coal Bed Methane) □ Cathodic □ Other (Core, Expl., etc.):	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: sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator: Well Name: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: ppm Fluid volume: bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	

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:				

Side Two



Operator Name:			Lease Name	e:			_ Well #:	
Sec Twp	S. R	East West	County:					
time tool open and clos	sed, flowing and shut s if gas to surface tes	I base of formations per in pressures, whether set, along with final chart well site report.	shut-in pressure	reached s	static level,	hydrostatic press	sures, bottom h	ole temperature, fl
Orill Stem Tests Taken (Attach Additional S		Yes No		Log	Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolo		☐ Yes ☐ No	N	lame			Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	I Electronically	Yes No Yes No Yes No						
List All E. Logs Run:			RECORD [Used			
	Size Hole	Report all strings set- Size Casing	-conductor, surface Weight		ate, producti Setting	on, etc. Type of	# Sacks	Type and Percen
Purpose of String	Drilled	Set (In O.D.)	Lbs. / Ft.		Depth	Cement	Used	Additives
		ADDITIONA	L OFMENTING (00115575	DECORD			
		ADDITIONA	L CEMENTING / :	SQUEEZE	RECORD			
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	d		Type and F	Percent Additives	
Shots Per Foot		ON RECORD - Bridge Plu ootage of Each Interval Pe				cture, Shot, Cement mount and Kind of Ma	•	d Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Line	r Run:	Yes No		
Date of First, Resumed I	Production, SWD or ENI	HR. Producing Me	thod:	Gas Li	ift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water	В	bls. (Gas-Oil Ratio	Gravity
DISPOSITIO	Used on Lease	Open Hole	METHOD OF COM Perf. D	MPLETION: ually Comp omit ACO-5)	. Cor	nmingled mit ACO-4)	PRODUCTIO	ON INTERVAL:
(If vented, Sub	mit ACO-18.)	Other (Specify) _						

WELL LOG

Thickness of Strata	Formation	Total Depth
0-10	Soil/Clay	10
3	Lime	13
7	Clay	20
9	Shale	29
3	Lime	32
147	Shale	179
7	Lime	186
8	Shale	194
14	Lime	208
8	Shale	216
8	Lime	224
4	Shale	228
23	Lime	251
25	Shale	276
18	Lime	294
73	Shale	367
23	Lime	390
18	Shale	408
7	Lime	415
23	Shale	438
18	Lime	456
17	Shale	473
7	Lime	480
2	Shale	482
16	Lime	498
8	Shale	506
25	Lime	531
4	Shale	535
4	Lime	539
4	Shale	543
6	Lime	549
169	Shale	718
6	Lime	724
16	Shale	740
4	Lime	744
19	Shale	763
3	Lime	766
39	Shale and Lime	805
1	Lime	806
2	Shale	808

Douglas County, KS Town Oilfield Service, Inc. Commenced Spudding: 9/27/2012 Lease Owner:AltaVista

1	Lime	809
5	Shale	814
1	Sandy Shale	815
1	Sandy Shale	816
15	Core	831
99	Sandy Shale	930
8	Sand	938
13	Sandy Shale	951
6	Sand	957
43	Shale	1000-TD
8.46		

Core					
		816			
1	Sand	817			
2	Sandy Lime	819			
8	Sand	827			
4	Sand	831			

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals D²x.14xh 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 RPMxd over SPMxR
- d SPMxRxD over RPM
- SPM RPMXD over RxD
- R RPMXD over SPMxD

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

* Need these to figure belt length

TO FIGURE AMPS:

WATTS = AMPS

746 WATTS equal 1 HP

Log Book

Well No. AI-3

Farm Baldwin West

(State)

 $\frac{15}{20}$ (Section) (Township) (Range)

For Altavista Entray
(Well Owner)

Town Oilfield Services, Inc.

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

Estate; Well No. AI-3	C.A	ASING AN	ID TUBING	MEASU	REMENTS	
Elevation 1063	Feet	ln.	Feet	ln.	Feet	ln.
Commenced Spuding 5-p+ 27 20 12			30.2 (1) 30.0097			
Finished Drilling Oct 7 20/2				1		
Driller's Name						
Driller's Name		+				
Driller's Name				1-1		
Tool Dresser's Name Lyan Wald Tool Dresser's Name	CAR SERVICE					
Tool Dresser's Name				-		
Tool Dresser's Name	-					
Contractor's Name						
2 15 20						•
(Section) (Township) (Range)						
Distance from 5 line, 7815 ft.						
1110,		- -				
5 sacks						
1 cort						
15 his 1 1 1	-					
15 his d -dry hole Phocasing and tubing						
CASING AND TUBING			1.80			1
RECORD						
10" Set 10" Pulled						
8" Set 8" Pulled	N-					
76%" Set 42 6%" Pulled						
4" Set 4" Pulled						
2" Set 2" Pulled		-0				

Thickness of	Farmatian	Total	
Strata	Formation	Depth	Remarks
0-10	Soil-clay	10	
3	Livate	13	
	Clay	20	
<u> </u>	clay Shall-e	29	
3	Linea	32	
147	shale	179	
7	Lime	1810	
8	shale	194	
14	Lime	203	
8 9 4	Shelt	216	-
9	Linne	224	
4	Shelt.	123	
23	Lime	251	
25	shalf	2.76	
16	Lipuxe	294	
73	Shale	367	
汉3	Lipa 2	390	
18	Shale	408	
7	Linne	415	
23	Shale	438	
18	Livat	456	
17	Shall	473	
7	Lime	450	
2	shale	482	
	Lime	498	
16 8	Shale	506	
25	Lime	531	
	-2-		2

		531	
Thickness of Strata	Formation	Total Depth	Remarks
4	Shale	535	
4	Limit	539	
	Short	543	
<u>lp</u>	lime	549	Heltha
164	Shalt	718	
<u>(</u> Q	Lime	724	
lle	Shale	740	
4	Lime	744	
19	shale	763	
3	Liva 2	766	
39	Shale & lime	805	
	Limit	806	
_ Z	Shale	808	
1	Limit	809	
5	Shel-e	814	
	5and + 5talp	315	
	sandystely	316,	oder-neskand
15	Roll	831	- no show
99	sandy shelt	430	Mo Oil
8	Sand	938	3/54 - NO O'
13	Sandy Shelt	951	mo 5;
(0)	Sand	957	no Dil -arey
43	shalf	1000	TD -DN Note
			plugged bet 2-2012
			.)))
	-4-		-5-

CORE -5-

Lore

		CO! C		
	Thickness of Strata	Formation	Total Depth	Remarks
	Strata /	sandy limes sandy limes	516 817 819 819	5% 0:1 - foot Saturation
	-	-8-		-9-



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 #

Invoice Date: 10/08/2012

Terms: 0/0/30, n/30

Page

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

BALDWIN WEST AI-3

34951 2-15-20 10-02-2012

KS

	Number Description		Unit Price	Total
1124	50/50 POZ C	EMENT MIX 90.00	10.9500	985.50
1118B	PREMIUM GEL	/ BENTONITE 454.00	.2100	95.34
	Description	Hours	Unit Price	Total
503	MIN. BULK DELIVERY	1.00	350.00	350.00
666	P & A NEW WELL	1.00	1030.00	1030.00
666	EQUIPMENT MILEAGE (ONE WAY	20.00	4.00	80.00
675	80 BBL VACUUM TRUCK (CEMEN	IT) 3.00	90 00	270 00

Parts: 1080.84 Freight: .00 Tax: 78.90 AR 2889.74

Labor: .00 Misc: .00 Total: 2889.74 .00 Supplies: .00 Change: .00

Signed

Date



TICKET NUMBER	34951
LOCATION OHOU	aiks
FOREMAN CORPUL	Eurod

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

FIELD TICKET & TREATMENT REPORT

		CEIVI	LIVI			
DATE		WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/2/12	3244 Baldu	in Wost #AI-3	se a	15	20	DG
CUSTOMER			alia Marana			
MAILING ADDRE	the there		TRUCK#	DRIVER	TRUCK#	DRIVER
			481	Casken	ck	
PO BO		7710 0005	666	GarMoo	GH	
24.104	STATE	ZIP CODE	475	Kei Det	KD	
Weller		66092	503	Dan Det	DD	
JOB TYPE PIL	HOLE SIZE	55/8" HOLE DE	РТН <u>980 '</u>	CASING SIZE & V	VEIGHT	
CASING DEPTH	DRILL PIPE	TUBING_			OTHER	
SLURRY WEIGH	T SLURRY V	OL WATER 9	WATER gal/sk CEMENT L		FT in CASING_	
DISPLACEMENT				RATE		
REMARKS: he	d safety meeting	established circu	elation thro	uch 1" tol	in at 7	D, mixed
+ pouros	10 sts' cemers	4. Autled 1" toh	ing to 50	o mixed +	pourpod , mived	10 060
59/50 POZU	ix request w/ 1	er col por ste	willow tile	na to 350	1 Marian	10 3ES
60 sts ce	ment, cemen	to surface, ou	led tubing	Tana wall	To accord	+ pumper
	cement.		To Tobally	How Min	, oppea	well of
<u>.,,</u>				γ	\cap	
.			+		/	
			+	+ 1>	\leftarrow	
 						
				-) 		
ACCOUNT				<u> </u>		,
CODE	QUANITY or UNITS	DESCRIPTION	N of SERVICES or PF	RODUCT	UNIT PRICE	TOTAL
5405N		PUMP CHARGE				1030.00
5406	20 mi	MILEAGE				80.00
5407	minimum	tor mileage				350.00
5502C	3 Krs	80 Vac		-		270,00
						210.
1124	90 sts	5/50 Pozmix	cornent			GRC CO
1118B	454 ±	Previous Go				985.50
11100	101 4	Tregaton Og				95.34
			-			
	** #					
			144 <u>.</u>			18
-						B
						1-101
					man.	111810 m
	* 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1	-8" FULL	· K
				V	LY	
			8			
				7.3%	SALES TAX	78.90
avin 3737					ESTIMATED	
AUTHODITTICH	No Co. Rep. on 1	acct.			TOTAL	2889.74
AUTHORIZTION_	UN CO. NO. 04 1	OCATION TITLE		1	DATE	No.

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

253384

DATE_