



**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: \_\_\_\_\_



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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Douglas County, KS  
Well: Mary Bell A-20  
Lease Owner:AltaVista

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

Commenced Spudding:  
8/14/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-28	Soil-Clay	28
121	Shale	149
5	Lime	154
7	Shale	161
13	Lime	174
8	Shale	182
7	Lime	189
7	Shale	196
22	Lime	218
14	Shale	232
3	Lime	235
12	Shale	247
17	Lime	264
74	Shale	338
23	Lime	361
17	Shale	378
7	Lime	385
25	Shale	410
16	Lime	426
7	Shale	433
1	Lime	434
9	Shale	443
26	Lime	469
10	Shale	479
21	Lime	500
4	Shale	504
4	Lime	508
4	Shale	512
6	Lime	518
173	Shale	691
6	Lime	697
41	Shale	738
3	Lime	741
21	Shale	762
1	Lime	763
22	Shale	785
1	Lime	786
3	Shale	789
8	Shale and Lime	797
2	Sand and Lime	799





# 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-20

Farm Mary Bell

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

Mary Bell Farm: Douglas County  
KS State: Well No. A-20

Elevation 1030

Commenced Spuding Aug 14 20 12

Finished Drilling Aug 16 20 12

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, 2420 ft.

Distance from E line, 3120 ft.

3 sacks

1 core

13 hrs

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
794.5		Seat		ripple	
827.05		Baffle			
858.5		Float		2 7/8	

CASING AND TUBING RECORD

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_  
8" Set \_\_\_\_\_ 8" Pulled \_\_\_\_\_  
7 7/8" Set 44' 7" 6 1/4" Pulled \_\_\_\_\_  
4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_  
2" Set \_\_\_\_\_ 2" Pulled \_\_\_\_\_



Thickness of Strata	Formation	Total Depth	Remarks
0-28	soil-clay	28	
121	shale	149	
5	Lime	154	
7	shale	161	
13	Lime	174	
8	shale	182	
7	Lime	189	
7	shale	196	
22	Lime	218	
14	shale	232	
3	Lime	235	
12	shale	247	
17	Lime	264	
74	shale	338	
23	Lime	361	
17	shale	378	
7	Lime	385	
25	shale	410	
16	Lime	426	
7	shale	433	
1	Lime	434	
9	shale	443	
26	Lime	469	
10	shale	479	
21	Lime	500	
4	shale	504	
4	Lime	508	



508

Thickness of Strata	Formation	Total Depth	Remarks
4	Shale	512	
6	Lime	518	Hertha
173	Shale	691	
6	Lime	697	
41	Shale	738	
3	Lime	741	
21	Shale	762	
1	Lime	763	
22	Shale	785	
1	Lime	786	
3	Shale	789	
8	Shale & lime	797	
2	sand & lime	799	no Oil
2	sand	801	10% Oil - perf
18	Core	819	
81	sandy shale	900	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 # 252151

Invoice Date: 08/17/2012 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

MARY BELL A-20  
37582  
1-15-20  
08-16-2012  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	116.00	10.9500	1270.20
1118B	PREMIUM GEL / BENTONITE	295.00	.2100	61.95
1111	SODIUM CHLORIDE (GRANULA	224.00	.3700	82.88
1110A	KOL SEAL (50# BAG)	580.00	.4600	266.80
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	4.00	100.00
495 CASING FOOTAGE	858.00	.00	.00
558 MIN. BULK DELIVERY	1.00	350.00	350.00
675 80 BBL VACUUM TRUCK (CEMENT)	1.50	90.00	135.00

Parts: 1733.46 Freight: .00 Tax: 126.54 AR 3475.00  
Labor: .00 Misc: .00 Total: 3475.00  
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 37582

LOCATION Ottawa KS

FOREMAN Fred Mader

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8/16/12	3244	Mary Bell # A-20	SW 14	15	20	DG
CUSTOMER Altavista Energy Inc			TRUCK #			
MAILING ADDRESS 4595 Highway 33			DRIVER			
CITY Wellsville			TRUCK #			
STATE KS			DRIVER			
ZIP CODE 66092			TRUCK #			
			DRIVER			

JOB TYPE Log string HOLE SIZE \_\_\_\_\_ HOLE DEPTH 900 CASING SIZE & WEIGHT 2 1/2" EVE  
 CASING DEPTH 858 DRILL PIPE Baffle in TUBING @ 827 OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 31' + Plug  
 DISPLACEMENT 4.8 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Establish pump rate. Mix + Pump 1/2 Gal HE-100 Polymer  
 Flush. Circulate to condition hole. Mix + Pump 100# Gal  
 Flush. Mix + Pump 116 sks 50/50 Por Mix Cement 2% 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  
 Value. Shut in Casing

Tos Drilling - Wes

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 <sup>00</sup>
5406	25 mi	MILEAGE	495	100 <sup>00</sup>
5402	858	Casing footage		N/C
5407	Mini pump	Ten Miles	558	350 <sup>00</sup>
5302C	1 1/2 hr	80 BBL Vac Truck	675	135 <sup>00</sup>
1124	116 sks	50/50 Por Mix Cement		1270 <sup>20</sup>
118B	295#	Premium Coal		61 <sup>95</sup>
111	224#	Granulated Salt		82 <sup>88</sup>
110A	580#	Kol Seal		266 <sup>80</sup>
4402	1	2 1/2" Rubber Plug		25 <sup>00</sup>
1401	1/2 Gal	NE-100 Poly Ther		23 <sup>63</sup>
			7.3%	SALES TAX
				ESTIMATED TOTAL
				126 <sup>54</sup>
				3475 <sup>00</sup>

Ravin 3737

AUTHORIZATION Wesley Dollard

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.

252151