



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
---	---

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
-----------------------------------	-----------	---------	-------------	---------------	---------

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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
---	--	--

Dougals County, KS
Well: Mary Bell AI-20
Lease Owner: AltaVista

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

Commenced Spudding:
8/3/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-15	Soil-Clay	15
4	Wet Clay	19
143	Shale	162
5	Lime	167
6	Shale	173
15	Lime	188
7	Shale	195
7	Lime	202
7	Shale	209
23	Lime	232
13	Shale	245
7	Lime	252
5	Shale	257
19	Lime	276
74	Shale	350
23	Lime	373
17	Shale	390
7	Lime	397
24	Shale	421
16	Lime	437
7	Shale	444
2	Lime	446
6	Shale	452
29	Lime	481
7	Shale	488
24	Lime	512
4	Shale	516
4	Lime	520
5	Shale	525
5	Lime	530
173	Shale	703
5	Lime	708
6	Shale	714
4	Lime	718
8	Shale	726
8	Lime	734
15	Shale	749
3	Lime	752
20	Shale	772
1	Lime	773

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. AI-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

Thickness of Strata	Formation	Total Depth	Remarks
0-15	soil-clay	15	
4	wet clay	19	water
143	shale	162	
5	Lime	167	
6	shale	173	
15	Lime	188	
7	shale	195	
7	Lime	202	
7	shale	209	
23	Lime	232	
13	shale	245	
7	Lime	252	
5	shale	257	
19	Lime	276	
74	shale	350	
23	Lime	373	
17	shale	390	
7	Lime	397	
24	shale	421	
16	Lime	437	
7	shale	444	
2	Lime	446	
6	shale	452	
29	Lime	481	
7	shale	488	
24	Lime	512	
4	shale	516	

516

Thickness of Strata	Formation	Total Depth	Remarks
4	Lime	520	
5	Shale	525	
5	Lime	530	
173	shale	703	Hertha
5	Lime	708	
6	shale	714	
4	Lime	718	
8	shale	726	
8	Lime	734	
15	shale	749	
3	Lime	752	
20	shale	772	
1	Lime	773	
15	shale	788	
12	shale & lime	800	
2	Lime	802	
11	shale	813	
5	sandy shale	818	
1	sand	819	odor - no show
19.5	core	838.5	
1.5	sand	840	solid oil - perf
100	shale	940	TD

COFC

Thickness of Strata	Formation	Total Depth	Remarks
		819	
.5	sand	819.5	broken 25% oil
1	sand	820.5	solid oil
1	sand	821.5	75% oil
1	sand	822.5	solid oil
1	sand & sandy shale	823.5	50% oil
4.5	sand	828	solid oil
1.5	sand & sandy shale	829.5	25% oil
9	sand	838.5	solid oil
			819.5 - 821.5 - greyish smells like old return water
			822.5 - 823.5 greyish - smells like old return water
			829.5 - 834.5 greyish - smells like old return water

perf



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 # 251905

=====
Invoice Date: 08/14/2012 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

MARY BELL AI-20
37444
1-15-20
08-07-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	114.00	10.9500	1248.30
1118B	PREMIUM GEL / BENTONITE	292.00	.2100	61.32
1111	SODIUM CHLORIDE (GRANULA	220.00	.3700	81.40
1110A	KOL SEAL (50# BAG)	570.00	.4600	262.20
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	901.00	.00	.00
T-106 WATER TRANSPORT (CEMENT)	2.00	112.00	224.00
510 MIN. BULK DELIVERY	1.00	350.00	350.00

=====
Parts: 1704.85 Freight: .00 Tax: 124.46 AR 3533.31
Labor: .00 Misc: .00 Total: 3533.31
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____

