

Kansas Corporation Commission Oil & Gas Conservation Division

1107536

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:	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 SWD 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?
If Workover/Re-entry: Old Well Info as follows:	
Operator: Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW	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:
GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or 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

1107536

Operator Name:			Lease Name:			_ Well #:	
Sec Twp	S. R	East West	County:				
time tool open and clo	osed, flowing and shu es if gas to surface te	nd base of formations pe it-in pressures, whether est, along with final char well site report.	shut-in pressure rea	ached static level,	hydrostatic press	sures, bottom h	nole temperature, fluid
Drill Stem Tests Taker (Attach Additional S		Yes No		_og Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geo	logical Survey	Yes No	Nar	ne		Тор	Datum
Cores Taken Electric Log Run Electric Log Submittee (If no, Submit Copy		Yes No Yes No Yes No					
List All E. Logs Run:							
				lew Used			
D (0)	Size Hole	Report all strings set	t-conductor, surface, in Weight	termediate, product	on, etc. Type of	# Sacks	Type and Percent
Purpose of String	Drilled	Set (In O.D.)	Lbs. / Ft.	Depth	Cement	Used	Additives
Purpose:	Donth		AL CEMENTING / SQ	UEEZE RECORD			
Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	# Sacks Used Type			
Protect Casing Plug Back TD							
Plug Off Zone							
Shots Per Foot	PERFORATI	ON RECORD - Bridge Plu	ıgs Set/Type		cture, Shot, Cement		
	Specify	Footage of Each Interval Pe	erforated	(A)	mount and Kind of Ma	aterial Used)	Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	IHR. Producing Me		Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wa	iter B	bls. (Gas-Oil Ratio	Gravity
	I						
DISPOSITION	ON OF GAS:		METHOD OF COMPL			PRODUCTIO	ON INTERVAL:
Vented Sold		Open Hole			nmingled mit ACO-4)		
(If vented, Sui	bmit ACO-18.)	Other (Specify)					

DRILLERS LOG

														10.000000000000000000000000000000000000
API NO:	15 - 031 -	23308 - 0	0 - 00		•		55.497.500 V		S. 14	7	. 22	R. 16	<u>E.</u>	W.
OPERATOR:	ALTAVIS	TA ENERGY	Y INC		•8					LOC	ATION:	NE NW	NW SW	
									l	C	OUNTY:	COFFEY		
ADDRESS:	4595 K-33	3 HWY, P.O.	BOX 128, \	WELLSVIL	LE, KS 660	92				E	LEV. GR.:	1037		
											DF:		KB:	
WELL #:	12	- 0	LEASI	E NAME:	SAUDER									
OOTAGE LO	CATION:	2475	FEET	FROM	(N)	<u>(S)</u>	LINE	4785	, FE	ET F	ROM	<u>(E)</u>	(W)	LINE
CONT	RACTOR:	FINNEY DI	RILLING CO	MPANY				GEO	LOGIS	ST: _[OOUG EV	'ANS		
SPU	D DATE:	9/5/2	2012					TOTA	L DEPT	гн: _	1093		P.B.T.D.	
DATE COM	PLETED:	9/7/2	2012					OIL PUR	CHASI	ER: C	OFFEYV	ILLE RESC	OURCES	
			12	C	ASING	RECOR	D							
REPORT (OF ALL ST	RINGS - SU	RFACE, IN	TERMEDIA	ATE, PRODI	JCTION, ET	C.							
PURPOSE	OF STRING	SIZE HOLE	SIZE CASIN	IG SET (in	WEIGHT	SETTING	DEPTH	TYPE	SACI	ks	TYPE	AND % ADD	ITIVES	7

PURPOSE OF STRING	SIZE HOLE DRILLED	SIZE CASING SET (in O.D.)	WEIGHT LBS/FT	SETTING DEPTH	TYPE CEMENT	SACKS	TYPE AND % ADDITIVES
SURFACE:	12.2500	7	19	49.10	OWC	55	SERVICE COMPANY
PRODUCTION:	5.8750	2.8750 Brd	6.5	1075	OWC	137	SERVICE COMPANY

WELL LOG

CORES: #1 - 1020 - 1032

RECOVERED: **ACTUAL CORING TIME:** RAN: 3 CENTRALIZERS

1 SEATING NIPPLE 1 FLOATSHOE 1 BAFFLE 1 COLLAR

FORMATION	TOP	BOTTOM
TOP SOIL	0	4
CLAY .	4	26
SAND & GRAVEL	26	31
LIME	31	33
SAND	33	37
SHALE	37	227
LIME	227	277
SHALE	277	370
LIME	370	388
SHALE	388	390
LIME	390	395
SHALE	395	420
LIME	420	441
SHALE	441	452
LIME	452	487
SHALE	487	497
LIME	497	499
RED BED	499	507
SHALE	507	546
KC LIME	546	570
SHALE	570	575
KC LIME	575	599
SHALE	599	608
KC LIME	608	630
SHALE	630	634
KC LIME	634	657
BIG SHALE	657	815
LIME	815	819
SHALE	819	836
LIME	836	844
SAND & SHALE	844	890
LIME	890	897
SAND & SHALE	897	927
LIME	927	930
SHALE	930	946
LIME	946	950
SHALE	950	980
LIME	980	982
SHALE	982	1015
CAP LIME	1015	1017
SHALE	1017	1019

CAP LIME 10° SAND & SHALE OIL 10°	20 1024
SAND & SHALE OIL 102	20 1024
CULATE	
SHALE 102	24 1026.5
SAND & SHALE OIL 102	6.5 1027
SHALE 102	27 1075
LIME 10	75 1077
SHALE 103	77 1093 T.D.
	1
 	
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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 #

252671

Invoice Date: 09/11/2012

Terms: 0/0/30, n/30

Page

ALTAVISTA ENERGY INC 4595 K-33 HIGHWAY P.O. BOX 128

WELLSVILLE KS 66092

(785)883-4057

SAUDER #12

37387 14-22-16

09-05-2012

KS

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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	74.00	.3700	27.38
1110A	KOL SEAL (50# BAG)	175.00	.4600	80.50
	iption	Hours	Unit Price	Total
T-106 WATER	TRANSPORT (CEMENT)	2.00	112.00	224.00
510 TON N	ILEAGE DELIVERY	73.24	1.34	98.14
666 CEMEN	F PUMP (SURFACE)	1.00	825.00	825.00
666 EQUII	MENT MILEAGE (ONE WAY)	.00	4.00	.00
666 CASIN	G FOOTAGE	49.00	.00	.00

Parts: 503.52 Freight: .00 Tax: 31.71 AR 1682.37

Labor:

.00 Misc:

.00 Total:

.00 Supplies:

.00 Change:

1682.37

Signed

Date



TICKET NUMBER_ FOREMAN Casey Kenned

FIELD TICKET & TREATMENT REPORT

	or 800-467-8676			CEMEN	VT			<i>3</i> 5.
DATE	CUSTOMER#	WELL	NAME & NUM	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/5/12	3244	Sauder	# 1	2	SW 14	22	ILe	20
CUSTOMER	- 1					FIFTH LEWIS CONTRACTOR		
MAILING ADDR					TRUCK#	DRIVER	TRUCK#	DRIVER
					481	Casken	ck	ļ
CITY	30x 128	STATE	ZIP CODE	=	العلمال	GacHoo	GH	
wellsvil	lla.	CATANICA MANAGES	6092		510	SetTuc		<u> </u>
			17.11		505-TIOG	Jas Ric	JE ZIL	<u> </u>
JOB TYPE Su	· 1/a'	HOLE SIZE 1	. 74	_ HOLE DEPT	H	CASING SIZE & V		
CASING DEPTH		DRILL PIPE		TUBING			OTHER	
SLURRY WEIG		SLURRY VOL			sk		CASING_O	
DISPLACEMEN		DISPLACEMENT		_ MIX PSI	. //-	RATE 4 60		-1 571
		meeting,	establis	shed circ	satron, m	ixed + pun	ned 33	Sta 50/5
Poznik C		ment to	Surface	e digp k	cod rem	ent w/ o	2 56/5 Y	mark wo
Shot in	casiva.		· · · · · · · · · · · · · · · · · · ·	i)				}
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		2000 C	-		-			
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ACCOUNT	99 000 000 000				Manager 11 Sections of the Control	Market Indiana		
CODE	QUANITY	or UNITS	D	ESCRIPTION (of SERVICES or PI	RODUCT	UNIT PRICE	TOTAL
54615	1	3	PUMP CHAR	GE				825.0
5406	on lease		MILEAGE		22 4			
5402	49'		Casina	footage	.	ati vir sv⊸		
5407A	73.2	138)	ileage				98.14
5501C	2	LIS	transp					224.00
			1			1000		
	1		4					1
1124	35	\$45	50/00	Pazuir	coment			303 ~
11188	59	#					 	383.29
	74	井 井	CIL	un Ge				12.39
1111	175	4t	Saut					27,38
1110A	175	n	Kolse	<u> </u>			ļ	80.50
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*								
								malalar
			-	_				Witting 66
				¥			Lind	1
Davie 3793	L					6.3%	SALES TAX	31.71

AUTHORIZTION No Co Rep on location TOTAL DATE

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's I acknowledge that the payment terms, unless specifically amended in this form are in effect for services identified on this formation are in effect for services identified on this formation.

ESTIMATED



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 Date: 09/11/2012 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 SAUDER #12 39653 14-22-16 09-07-2012 KS

Part Number Description Qty Unit Price Total 1124 50/50 POZ CEMENT MIX 145.00 10.9500 1587.75 1118B PREMIUM GEL / BENTONITE 344.00 .2100 72.24 1111 SODIUM CHLORIDE (GRANULA 305.00 .3700 112.85 KOL SEAL (50# BAG) .4600 1110A 725.00 333.50 4402 2 1/2" RUBBER PLUG 1.00 28.0000 28.00 Description Hours Unit Price Total 370 TON MILEAGE DELIVERY 303.41 1.34 406.57 667 80 BBL VACUUM TRUCK (CEMENT) 1.50 90.00 135.00 666 CEMENT PUMP 1.00 1030.00 1030.00 666 EQUIPMENT MILEAGE (ONE WAY) 45.00 4.00 180.00 666 CASING FOOTAGE 1076.00 .00 .00

Parts: 2134.34 Freight: .00 Tax: 134.46 AR 4020.37

Labor: .00 Misc: .00 Total: 4020.37 Sublt: .00 Supplies: .00 Change: .00

Signed______Date



PO Box 884, Chanute, KS 66720

FIELD TICKET & TREATMENT REPORT

620-431-9210	or 800-467-867) <u> </u>	CEMEN	I			
DATE	CUSTOMER #	WELL NAME & NUMI	BER	SECTION	TOWNSHIP	RANGE	COUNTY
9/7/12	3244	Sauder # 12		SW 14	22	16	CO
CUSTOMER	. –						
Altavist	to therqu			TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDR				481	Cashen	ck	
Pa Bo	x 128			(ddo	Gar Moo	6M	
CITY	1	STATE ZIP CODE		667	ChiBec	CB	
Wellsoil	lle	KS 66092		370	Jas Ric	JB	
JOB TYPE los	restring	HOLE SIZE 598"	HOLE DEPTH		CASING SIZE & W	/EIGHT_2%_"	EVE
CASING DEPTH	1076	DRILL PIPE	TUBING be	He -104		OTHER	
SLURRY WEIGI		SLURRY VOL	WATER gal/s	k	CEMENT LEFT in	CASING 29	!
DISPLACEMEN	T6.09 6615	DISPLACEMENT PSI	MIX PSI		RATE 4.56	PM	
REMARKS: L	eld safety	meeting established	discola	Hon, rike	d+ presed	1 100 # F	remium
Gel follo		2 stole forh water				TO Poznis	coment
w/ 270 a					o surface.		
auged	2 1/2 " rube	r plug to battle w	6.09 b				800 PS1.
released	pressure s	hotin casing.				_	
				\wedge			
•	389		938 31			$\overline{}$	
						7	
							

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUC	ΣT	UNIT PRICE	TOTAL
5401		PUMP CHARGE			1030.00
5406	45 mg	MILEAGE			180.00
5402	1076'	casine footage			
5407A	303.413	ton mileage			406.57
5502C	1.5 hm	80 Vac			135.00
1124	145 sks	50/- D			1587.75
		50/50 Popuix cement	~~		
11183	344 #	Premium Gel			72.24
H U	305#	Salt		<u> </u>	112.85
11104	735 #	Kalseal			333,50
4402	1.	21/2" rubber plug			28.00
		1 /			£
			-	-	-los
			Land Line	ranius	a g g ca
			L. B. J.		
			W		
			6.3%		124 11/
Ravin 3737			4.210	SALES TAX ESTIMATED	134,46
	1) (0	Y		TOTAL	4020,37
AUTHORIZTION_	No Co. Rep. on 1	ocation 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

252738