



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: \_\_\_\_\_



1153265

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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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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Douglas County, KS  
 Well: A-30  
 Lease Owner: Altavista

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

Commenced Spudding:  
 June 16 2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-14	Soil-Clay	14
1	Lime	15
8	Clay	23
4	Lime	27
143	Shale	170
5	Lime	175
5	Shale	180
15	Lime	195
7	Shale	202
7	Lime	209
7	Shale	216
27	Lime	243
21	Shale	264
18	Lime	282
18	Sand & Sandy Shale	300
56	Shale	356
23	Lime	379
17	Shale	396
, 7	Lime	403
16	Shale	419
10	Sand & Sandy Shale	429
16	Lime	445
18	Shale	463
26	Lime	489
5	Shale	494
24	Lime	518
5	Shale	523
4	Lime	527
3	Shale	530
7	Lime	537
170	Shale	707
6	Lime	713
6	Shale	719
2	Lime	721
10	Shale	731
5	Lime	736
18	Shale	754
3	Lime	757
50	Shale	807
2	Lime	809



# 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  $BPH \times PSI \times .0004$

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-30

Farm Mary Bell

KS Douglas  
(State) (County)

1 15 20  
(Section) (Township) (Range)

For Altavista Energy inc  
(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-30

Elevation 1050  
Commenced Spuding June 16, 2013  
Finished Drilling June 17, 2013  
Driller's Name Wesley Dollard  
Driller's Name \_\_\_\_\_  
Driller's Name \_\_\_\_\_  
Tool Dresser's Name Ryan Ward  
Tool Dresser's Name Greg Perry  
Tool Dresser's Name \_\_\_\_\_  
Contractor's Name TOS  
1 15 20

(Section) (Township) (Range)  
Distance from S line, 1980 ft.  
Distance from E line, 3795 ft.

5 sacks  
9 hrs

### CASING AND TUBING RECORD

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_  
8" Set \_\_\_\_\_ 8" Pulled \_\_\_\_\_  
7 5/8" Set 45 6 1/4" Pulled \_\_\_\_\_  
4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_  
2" Set \_\_\_\_\_ 2" Pulled \_\_\_\_\_

email - June 16 - 12:00 surface  
brooke - June 17 - 2:45 longest

### CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
817		Seat nipple			
879.85		Baffle			
907.45		float			
				2 11	
					18

Thickness of Strata	Formation	Total Depth	Remarks
3-14	soil - clay	14	
1	Lime	15	
8	clay	23	
4	Lime	27	
143	shale	170	
5	Lime	175	
5	shale	180	
15	Lime	195	
7	shale	202	
7	Lime	209	
7	shale	216	
27	Lime	243	shells
21	shale	264	
18	Lime	282	
18	sand & sandy shale	300	no oil
56	shale	356	
23	Lime	379	
17	shale	396	
7	Lime	403	
16	shale	419	
10	sand	429	no oil
16	Lime	445	
18	shale	463	
26	Lime	489	
5	shale	494	
24	Lime	518	
5	shale	523	

523

Thickness of Strata	Formation	Total Depth	Remarks
4	Lime	527	
3	shale	530	
7	Lime	537	
170	shale	707	Heath
6	Lime	713	
6	shale	719	
2	Lime	721	
10	shale	731	
5	Lime	736	
18	shale	754	
3	Lime	757	some lime
50	shale	807	
2	Lime	809	
4	shale	813	
6	sandy shale	819	no oil
3	sand	822	broken 10% oil
6	sand	828	broken 75% oil
26	sand	854	solid - good saturation
8	sand	862	dead oil
78	shale	940	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 # 259781

Invoice Date: 06/20/2013 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-30  
42023  
1-15-20  
06-17-2013  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	113.00	11.5000	1299.50
1118B	PREMIUM GEL / BENTONITE	290.00	.2200	63.80
1111	SODIUM CHLORIDE (GRANULA	218.00	.3900	85.02
1110A	KOL SEAL (50# BAG)	565.00	.4600	259.90
1401	HE 100 POLYMER	.50	47.2500	23.63
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	1085.00	1085.00
368 EQUIPMENT MILEAGE (ONE WAY)	20.00	4.20	84.00
368 CASING FOOTAGE	907.00	.00	.00
558 MIN. BULK DELIVERY	1.00	368.00	368.00
675 80 BBL VAÇUUM TRUCK (CEMENT)	2.00	90.00	180.00

Parts: 1761.35 Freight: .00 Tax: 128.58 AR 3606.93  
 Labor: .00 Misc: .00 Total: 3606.93  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

259781

TICKET NUMBER 42023  
LOCATION Ottawa  
FOREMAN Alan Mader

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
6-17-13	3244	Mary Bell A-30	SW1	15	20	DG
CUSTOMER Alquist			TRUCK #			
MAILING ADDRESS P.O. Box 128			DRIVER			
CITY Wellsville		STATE KS	ZIP CODE 66092	TRUCK #		
			DRIVER			

JOB TYPE longstring HOLE SIZE 5 5/8 HOLE DEPTH 940 CASING SIZE & WEIGHT 2 7/8  
CASING DEPTH 907 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER 879 baffle  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING yes  
DISPLACEMENT 5.1 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4.6pm

REMARKS: Hooked to casing. Established rate. Mixed & pumped 1/2 gal polymer to condition hole, followed by 100# gel. Mixed & pumped 113 sk 50/50 cement plus 2% gel, 3% salt, 5# Kalseal per sack. Circulated cement. Flushed pump. Pumped plus to baffle. Well held 800 PSI. Set float. Closed valve

TDS Wes Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00
5406	20	MILEAGE	368	84.00
5402	907'	casing footage	368	—
5407	mi	ten miles	558	368.00
5502C	2	80 vac	875	180.00
1127	113	50/50 cem		1299.50
118B	290#	gel		63.80
111	218#	salt		85.02
110A	565#	Kalseal		259.90
401	1/2	polymer		23.63
402	1	2 1/2 plug		29.50
<b>completed</b>				
SALES TAX				128.58
ESTIMATED TOTAL				3606.93

Revin 3737

AUTHORIZATION Bryan Miller 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.