



KANSAS CORPORATION COMMISSION 1157399
OIL & GAS CONSERVATION DIVISION

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 # _____

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Franklin County, KS
Well:Williams A-5
Lease Owner:AltaVista

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

Commenced Spudding:
7/9/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-18	Soil-Clay	18
87	Shale	105
5	Lime	110
2	Shale	112
16	Lime	128
8	Shale	136
9	Lime	145
7	Shale	152
45	Lime	197
3	Shale	200
14	Lime	214
19	Sand	233
57	Shale	290
21	Lime	311
20	Shale	331
8	Lime	339
26	Shale	365
8	Lime	373
7	Shale	380
2	Lime	382
15	Shale	397
22	Lime	419
11	Shale	430
21	Lime	451
4	Shale	455
4	Lime	459
2	Shale	461
6	Lime	467
112	Shale	579
15	Sand	594
6	Sandy Shale	600
14	Shale	614
6	Shale	620
17	Shale	637
8	Lime	645
6	Shale	651
3	Lime	654
10	Shale	664
10	Lime	674
12	Shale	686

Short Cuts

TANK CAPACITY

BBLs. (42 gal.) equals $D^2 \times 14xh$

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-5

Farm Williams

KS Franklin
(State) (County)

24 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

Brooke 3.10 surface
Taylor 2.00 long string

Williams Farm: Franklin County
KS State; Well No. A-5

Elevation 1022
Commenced Spuding July 9 20 13
Finished Drilling July 10 20 13
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
24 15 20

(Section) (Township) (Range)
Distance from S line, 1795 ft.
Distance from E line, 4120 ft.

3 sacks
8 hrs

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
8" Set _____ 8" Pulled _____
7 7/8" Set 20 6 1/4" Pulled _____
4" Set _____ 4" Pulled _____
2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
761.	80	Seat nipple			
823.	80	Baffle			
853.65		Float	2 7/8		

Thickness of Strata	Formation	Total Depth	Remarks
0-18	soil-clay	18	
87	shale	105	
5	lime	110	
2	shale	112	
16	lime	128	
8	shale	136	
9	lime	145	
7	shale	152	
45	lime	197	shells
3	shale	200	
14	lime	214	
19	sand & shale	233	no oil
57	shale	290	
21	lime	311	
20	shale	331	
8	lime	339	
26	shale	365	
8	lime	373	
7	shale	380	
2	lime	382	
15	shale	397	
22	lime	419	
11	shale	430	
21	lime	451	
4	shale	455	
4	lime	459	
2	shale	461	

461

Thickness of Strata	Formation	Total Depth	Remarks
6	Lime	467	Hertha
112	Shale	579	sandy shale
15	sand	594	no oil
6	sandy shale	600	
14	shale	614	
6	shale & lime	620	
17	shale	637	
8	Lime	645	
6	shale	651	
3	Lime	654	
10	shale	664	
10	Lime	674	
12	shale	686	
3	Lime	689	
12	shale	701	
4	Lime	705	
14	shale	719	
1	Lime	720	
3	shale	723	
3	Lime	726	
3	shale	729	
2	sandy shale	731	
13	sand	744	broken - no show
20	sand	764	broken - good show
12	sand	776	solid - good saturation - perf
4	sandy lime	780	broken 50% oil
10	sand	790	black - dead oil



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 # 260445

Invoice Date: 07/12/2013 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

WILLIAMS A-5
42125
24-15-20
07-10-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	105.00	11.5000	1207.50
1118B	PREMIUM GEL / BENTONITE	276.00	.2200	60.72
1111	SODIUM CHLORIDE (GRANULA	203.00	.3900	79.17
1110A	KOL SEAL (50# BAG)	525.00	.4600	241.50
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	853.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
548 MIN. BULK, DELIVERY	1.00	368.00	368.00

Parts: 1642.02 Freight: .00 Tax: 125.62 AR 3484.64
Labor: .00 Misc: .00 Total: 3484.64
Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

260445

TICKET NUMBER 42125

LOCATION Ottawa

FOREMAN Alan Mad

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
7-10-13	3244	Williams A.5	SW 24	15	30	FR
CUSTOMER <u>Altavista Energy</u>						
MAILING ADDRESS <u>P.O. Box 128</u>						
CITY <u>Wellsville</u>		STATE <u>KS</u>	ZIP CODE <u>66090</u>			

TRUCK #	DRIVER	TRUCK #	DRIVER
516	Al Mad		
368	Al Mad		
370	Kei Car		
548	Mikhan		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 880 CASING SIZE & WEIGHT 2 1/8
 CASING DEPTH 853 DRILL PIPE _____ TUBING _____ OTHER 824 baffle
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 4.8 DISPLACEMENT PSI 800 MIX PSI 200 RATE 46 ppm

REMARKS: Hooked to casing. Established rate. Mixed & pumped 1/2 gal polymer followed by 100 # gel. Mixed & pumped 1055k 50150 cement plus 270 gel, 570 salt, 5# kolseal per sack. Circulated cement. Flushed pump. Pumped plug to baffle well head 800 PSI. Set float. Closed valve.

105, Wcs

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5406	1	PUMP CHARGE	368	1085.00
5406	20	MILEAGE	368	84.00
5402	853	casing footage	368	-
5407	min	ton miles	548	368.00
5302C	2	80 val	320	180.00
1124	105	50150 cement		1207.50
118B	276 #	gel		60.72
1111	203 #	salt		79.14
110A	525 #	kolseal		241.50
1401	1/2	Polymer		23.63
4402	1	2 1/2 plug		29.50



Completed

Flavin 3737

NO Company rep
Jim OK'd

AUTHORIZATION _____

TITLE _____

DATE _____

SALES TAX 125.62
ESTIMATED TOTAL 3484.64

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.