



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: _____



1157416

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 AI-3
Lease Owner:AltaVista

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

Commenced Spudding:
7/16/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-20	Soil-Clay	20
103	Shale	123
5	Lime	128
2	Shale	130
16	Lime	146
8	Shale	154
10	Lime	164
6	Shale	170
56	Sand	226
4	Shale	230
22	Sand	252
53	Shale	305
22	Lime	327
5	Shale	332
2	Sandy Lime	334
6	Sandy Shale	340
7	Red Bed	347
7	Lime	354
28	Shale	382
7	Lime	389
7	Shale	396
1	Lime	397
16	Shale	413
22	Lime	435
9	Shale	444
24	Lime	468
2	Shale	470
3	Lime	473
4	Shale	477
7	Lime	483
113	Shale	596
16	Sand	612
19	Shale	631
12	Shale	643
10	Shale	653
8	Lime	661
7	Shale	668
3	Lime	671
10	Shale	681
7	Lime	688

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-3

Farm William S

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

Thickness of Strata	Formation	Total Depth	Remarks
0-20	soil-clay	20	
103	Shale	123	
5	Lime	128	
2	Shale	130	
16	Lime	146	
8	Shale	154	
10	Lime	164	
6	Shale	170	
56	Lime	226	
4	Shale	230	
22	sand	252	
53	Shale	305	no oil
22	Lime	327	
5	Shale	332	
2	sandy lime	334	
6	sandy shale	340	
7	red bed	347	
7	Lime	354	
28	Shale	382	
7	Lime	389	
7	Shale	396	
1	Lime	397	
16	Shale	413	
22	Lime	435	
9	Shale	444	
24	Lime	468	
2	Shale	470	

470

Thickness of Strata	Formation	Total Depth	Remarks
3	Lime	473	
4	shale	477	
7	Lime	483	
113	shale & sandy shale	596	Hertha
16	sand	612	no Oil
19	shale	631	
12	shale & lime	643	
10	shale	653	
8	Lime	661	
7	shale	668	
3	Lime	671	
10	shale	681	
7	Lime	688	
13	shale	701	
2	Lime	703	
42	shale	745	
1	sandy shale	746	
18	sand	764	broken - brown - no Oil
16	sand	780	mostly solid - good show
6	sand	786	broken 10% Oil
4	sand	790	no Oil
2	sand	792	broken - 25% Oil
10	sand	802	solid - good saturation
2	sand	804	black - dead Oil
3	shale	807	
9	sand & shale	816	odor - no show
64	shale	880	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 # 260646

Invoice Date: 07/18/2013 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 AI-3
42181
24-15-20
07-17-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	100.00	11.5000	1150.00
1118B	PREMIUM GEL / BENTONITE	268.00	.2200	58.96
1111	SODIUM CHLORIDE (GRANULA	210.00	.3900	81.90
1110A	KOL SEAL (50# BAG)	500.00	.4600	230.00
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	866.00	.00	.00
548 MIN. BULK DELIVERY	1.00	368.00	368.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00

Parts: 1573.99 Freight: .00 Tax: 120.43 AR 3411.42
Labor: .00 Misc: .00 Total: 3411.42
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 785/672-8822 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 GILLETTE, WY 307/686-4914 CUSHING, OK 918/225-2650



CONSOLIDATED
Oil Well Services, LLC

260646

TICKET NUMBER 42181

LOCATION Ottawa, KS

FOREMAN Casey Kennedy

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
7/17/13	3244	Williams # AI-3	SW 24	15	20	FR
CUSTOMER <u>Altavista Energy</u>						
MAILING ADDRESS <u>PO Box 128</u>						
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66092</u>				

TRUCK #	DRIVER	TRUCK #	DRIVER
481	Caskey		
368	Ar/McD		
548	WilMet		
675	KeiDet		

JOB TYPE logstring HOLE SIZE 5 5/8" HOLE DEPTH 880' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 816' DRILL PIPE _____ TUBING batfle - 836' OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 30'
 DISPLACEMENT 4.84 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 3 bpm

REMARKS: held safety meeting, established circulation, mixed + pumped 1/2 # gal Polymer + 100 # Premium Gel followed by 10 bbls fresh water, mixed + pumped 100 # 50/50 Pozmix cement w/ 2 7/8 gal, 5% salt, + 5 # Kalseal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to batfle w/ 4.84 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

[Handwritten signature]

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	20 mi	MILEAGE		84.00
5402	816'	casing footage		
5407	minimum	tan mileage		368.00
5502c	2 hrs	80 vac		180.00
1124	100 sks	50/50 Pozmix cement		1150.00
1118B	208 #	Premium Gel		58.96
1111	210 #	Salt		81.90
1110A	500 #	Kalseal		230.00
1401	1/2 gal	Polymer		23.63
4402	1	2 1/2" rubber plug		29.50
			7.65%	SALES TAX
				ESTIMATED TOTAL
				120.43
				3411.42

Completed

Ravin 3737

AUTHORIZATION No Co. Rep on location 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.