



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 Bbbs.	Gas Mcf	Water Bbbs.	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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Douglas County, KS
 Well: Baldwin Unit A-31
 Lease Owner: AltaVista

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

Commenced Spudding:
 6/21/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-30	Soil-Clay	30
144	Shale	174
5	Lime	179
7	Shale	186
14	Lime	200
8	Shale	208
7	Lime	215
5	Shale	220
22	Lime	242
30	Shale	272
18	Lime	290
14	Sandy Shale	304
59	Shale	363
22	Lime	385
17	Shale	402
9	Lime	411
11	Shale	421
11	Sand	432
18	Lime	450
18	Shale	468
23	Lime	491
8	Shale	499
24	Lime	523
4	Shale	527
4	Lime	531
3	Shale	534
7	Lime	541
167	Shale	708
5	Lime	713
7	Shale	720
2	Lime	722
9	Shale	731
3	Lime	734
20	Shale	754
3	Lime	757
44	Shale	801
3	Lime	804
8	Shale	812
5	Sandy Shale	817
19	Sand	836

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-31

Farm Baldwin Unit

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

Thickness of Strata	Formation	Total Depth	Remarks
0-30	soil-clay	30	
144	shale	174	
5	lime	179	
7	shale	186	
14	lime	200	
8	shale	208	
7	lime	215	
5	shale	220	
22	lime	242	shells
30	shale	272	some sand - no oil
18	lime	290	
14	sandy shale	304	some sand - no oil
59	shale	363	
22	lime	385	
17	shale	402	
9	lime	411	
11	shale	421	
11	sand	432	no oil
18	lime	450	
18	shale	468	
23	lime	491	
8	shale	499	
24	lime	523	
4	shale	527	
4	lime	531	
3	shale	534	
7	lime	541	Heath



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 # 259882

Invoice Date: 06/25/2013 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

BALDWIN WEST A-31
42054
1-15-20
06-22-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	111.00	11.5000	1276.50
1118B	PREMIUM GEL / BENTONITE	287.00	.2200	63.14
1111	SODIUM CHLORIDE (GRANULA	215.00	.3900	83.85
1110A	KOL SEAL (50# BAG)	555.00	.4600	255.30
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1085.00	1085.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	4.20	105.00
495 CASING FOOTAGE	928.00	.00	.00
510 MIN. BULK DELIVERY	1.00	368.00	368.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
712 WEEK-END SURCHARGE	1.00	.00	.00

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Parts: 1731.92 Freight: .00 Tax: 126.43 AR 3596.35
Labor: .00 Misc: .00 Total: 3596.35
Sublt: .00 Supplies: .00 Change: .00
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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

259882

TICKET NUMBER 42054

LOCATION Ottawa KS

FOREMAN Fred 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
6/22/13	3244	Baldwin Unit # A-31	SW 1	15	20	DG.

CUSTOMER
Alta Vista Energy

MAILING ADDRESS
P.O. Box 128

CITY Wellsville STATE Ks ZIP CODE 66092

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fred Mader		
495	Harvey		
675	Kelley		
510	Scott		

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 940 CASING SIZE & WEIGHT 2 7/8 EUE

CASING DEPTH 928' DRILL PIPE Bafflein TUBING @ 897 OTHER _____

SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 31' + Plug

DISPLACEMENT 3.218AL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5BPM

REMARKS: Hold crew mixing. Establish pump rate. Pump 1/2 Gal HE-100 Polymer. Circulate to condition hole. Mix Pump 100# Gel Flush. Mix + Pump 111 sks 50/50 Pac Mix Cement 2% Gel 5% Salt 5# Kol Seal /sk. Cement to surface. Flush pump + lines clean Displace 2 1/2" rubber plug to baffle in casing. Pressure to 900# PSI Release pressure to set float valve. Shut in casing.

TOS Drilling - wes

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085 ⁰⁰
5406	25 mi.	MILEAGE	495	105 ⁰⁰
5402	928'	Casing footage		N/C
5407	Minimum	Ten Miles	510	368 ⁰⁰
5502C	2 hrs	80 BBL Vac Truck	675	180 ⁰⁰
5408	1	Weekend Surcharge	16 @ 21%	N/C 728⁶⁸
1104	111 sks	50/50 Pac Mix Cement		1276 ⁵⁰
1115B	287#	Premium Gel		63 ¹⁴
1111	215#	Granulated Salt		83 ⁹⁵
1110A	555#	Kol Seal		255 ³⁰
4402	1	2 1/2" Rubber Plug		29 ⁵⁰
1401	1/2 Gal	HE-100 Polymer		23 ⁶³
			7.3%	SALES TAX
				ESTIMATED TOTAL
				126 ⁴³
				3596 ³⁵



Completed

Revin 3737

AUTHORIZATION _____

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.