



KANSAS CORPORATION COMMISSION 1162855
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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Douglas County, KS
Well: Neumer AI-2
Lease Owner:AltaVista

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

Commenced Spudding:
8/19/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-6	Soil-Clay	6
159	Sandstone	165
4	Lime	169
8	Shale	177
15	Lime	192
8	Shale	200
7	Lime	207
4	Shale	211
18	Lime	229
5	Shale	234
31	Sand	265
16	Lime	281
19	Sandy Shale	300
57	Shale	357
22	Lime	379
17	Shale	396
8	Lime	404
15	Shale	419
10	Sand	429
15	Lime	444
5	Shale	449
1	Lime	450
13	Shale	463
23	Lime	486
9	Shale	495
23	Lime	518
5	Shale	523
3	Lime	526
5	Shale	531
5	Lime	536
11	Shale	547
6	Sand	553
27	Shale	580
60	Sand	640
29	Shale	669
2	Lime	671
2	Shale	673
18	Sand	691
64	Shale	755
4	Lime	759

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. AI-2

Farm Neumer

KS Douglas
(State) (County)

14 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
0-6	soil-clay	6	
159	sandstone	165	water 35'
4	Lime	169	
8	shale	177	
15	Lime	192	
8	shale	200	
7	Lime	207	
4	shale	211	
18	Lime	229	
5	shale	234	
31	sand	265	no oil
16	Lime	281	
19	sandy shale	300	some sand - no oil
57	shale	357	
22	Lime	379	
17	shale	396	
8	Lime	404	
15	shale	419	
10	sand	429	425 - 429 - slight show
15	Lime	444	
5	shale	449	
1	Lime	450	
13	shale	463	
23	Lime	486	
9	shale	495	
23	Lime	518	
5	shale	523	

523

Thickness of Strata	Formation	Total Depth	Remarks
3	Lime	526	
5	Shale	531	
5	Lime	536	
11	shale	547	Merthg
6	Sand	553	some Lime
27	shale	580	no Oil
60	sand	640	
29	shale	669	no Oil
2	Lime	671	
2	shale	673	
18	Sand	691	
64	shale	755	no Oil
4	Lime	759	
9	Shale	768	
10	Lime	778	
17	Shale	795	
2	Lime	797	
4	Shale	801	
1	sand & sandy lime	802	no Oil
2	sand	804	solid - good show
9	sand	813	broken - good show
87	sandy shale	900	804-813 best 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 # 261548

Invoice Date: 08/23/2013 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

NEVMER AI-2
42314
NW 14-15-20
08-19-2013
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	36.00	15.7000	565.20
1118B	PREMIUM GEL / BENTONITE	68.00	.2200	14.96
	Description	Hours	Unit Price	Total
558	MIN. BULK DELIVERY	1.00	368.00	368.00
666	CEMENT PUMP (SURFACE)	1.00	870.00	870.00
666	EQUIPMENT MILEAGE (ONE WAY)	20.00	4.20	84.00
666	CASING FOOTAGE	83.00	.00	.00
675	80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00

Parts: 580.16 Freight: .00 Tax: 41.48 AR 2123.64
 Labor: .00 Misc: .00 Total: 2123.64
 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

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 # 261589

Invoice Date: 08/23/2013 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

NEVMER AI-2
42315
NW 14-15-20
08-20-2013
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	228.00	.3900	88.92
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
503 MIN. BULK DELIVERY	.50	368.00	184.00
666 CEMENT PUMP	1.00	1085.00	1085.00
666 EQUIPMENT MILEAGE (ONE WAY)	20.00	4.20	84.00
666 CASING FOOTAGE	880.00	.00	.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.50	90.00	225.00

Parts:	1765.25	Freight:	.00	Tax:	126.21	AR	3469.46
Labor:	.00	Misc:	.00	Total:	3469.46		
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

ASING MECHANICAL INTEGRITY TEST

DOCKET # _____

Disposal Enhanced Recovery:

NE NW SW NE, Sec 14, T 15 S, R 20 EW

NW-NP

Repressuring
Flood
Tertiary

3795 Feet from South Section Line
2195 Feet from East Section Line

Date injection started _____
API #15 -045 - 22, 012

Lease Neumer Well # AI-2
County Douglas

Operator: AltaVista Energy Inc.
Name & Address P.O. Box 128
Wellsville KS 66092

Operator License # 34350
Contact Person Doug Evans
Phone 785-883-4057

Max. Auth. Injection Press. _____ psi; Max. Inj. Rate _____ bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____

Conductor	Surface	Production	Liner	Size	Tubing
Size _____	<u>7"</u>	<u>2 7/8</u>	_____	_____	_____
Set at _____	<u>831</u>	<u>880.65</u>	_____	Set at _____	_____
Cement Top _____	<u>C/L</u>	<u>C/L</u>	_____	Type _____	_____
" Bottom _____	<u>83'</u>	<u>880.65</u>	_____	_____	_____

DV/Perf. _____ TD (and plug back) _____ 900 ft. depth
Packer type _____ Size _____ Set at _____
Zone of injection _____ ft. to ft. _____ Perf. or open hole _____

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

F Time: Start 10 Min. 20 Min. 30 Min.
I 12:15
E Pressures: 750 750 750 Set up 1 | System Pres. during test _____
L 12:45 Set up 2 | Annular Pres. during test _____
D _____ Set up 3 | Fluid loss during test _____ bbls.
D _____
A _____
T _____
A _____

Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with Pressure Test (rubber plug)

Test Date 8/27/2013 Using Midwest Surveys Company's Equipment

The operator hereby certifies that the zone between 0 feet and 880.65 feet

was the zone tested David Nelson Contractor
Signature Title

The results were Satisfactory , Marginal _____, Not Satisfactory _____

State Agent Taylor C Heneman Title Perit Witness: Yes _____ No

REMARKS: Pressured well up to 750#