



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: \_\_\_\_\_



1162952

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Douglas County, KS  
 Well: Neumer AI-5  
 Lease Owner: Altavista

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

Commenced Spudding:  
 8-15-2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-4	soil-clay	4
50	sandstone	54
91	shale	145
4	lime	149
6	shale	155
16	lime	171
8	shale	179
7	lime	186
3	shale	189
18	lime	207
7	shale	214
30	sand	244
16	lime	260
25	sandy shale	285
50	shale	335
23	lime	358
17	shale	375
8	lime	383
17	shale	400
8	sand	408
16	lime	424
3	shale	427
1	lime	428
14	shale	442
23	lime	465
7	shale	472
24	lime	496
4	shale	500
4	lime	504
4	shale	508
6	lime	514
7	shale	521
11	sand	532
26	shale	558
60	sand	618
36	shale	654
18	sand	672
78	shale	750
10	lime	760
16	shale	776



# 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-5

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
0-4	soil-clay	4	
50	sandstone	54	water 18'
91	shale	145	
4	Lime	149	
6	shale	155	
16	Lime	171	
8	shale	179	
7	Lime	186	
3	shale	189	
18	Lime	207	
7	shale	214	
30	sand	244	no oil
16	Lime	260	
25	sandy shale	285	some sand - no oil
50	shale	335	
23	Lime	358	
17	shale	375	
8	Lime	383	
17	shale	400	
8	sand	408	405-408 slight show
16	Lime	424	
3	shale	427	
1	Lime	428	
14	shale	442	
23	Lime	465	448- oil show
7	shale	472	
24	Lime	496	







**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 # 261443

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 A-I-5  
42344  
NW14-15-20  
08-15-2013  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	40.00	11.5000	460.00
1118B	PREMIUM GEL / BENTONITE	71.00	.2200	15.62
1111	SODIUM CHLORIDE (GRANULA	78.00	.3900	30.42
1110A	KOL SEAL (50# BAG)	200.00	.4600	92.00

  

Description	Hours	Unit Price	Total
370 80 BBL VACUUM TRUCK (CEMENT)	1.50	90.00	135.00
495 CEMENT PUMP (SURFACE)	1.00	870.00	870.00
495 EQUIPMENT MILEAGE (ONE WAY)	.00	4.20	.00
495 CASING FOOTAGE	68.00	.00	.00
558 MIN. BULK DELIVERY	.50	368.00	184.00

Parts:	598.04	Freight:	.00	Tax:	42.77	AR	1829.81
Labor:	.00	Misc:	.00	Total:	1829.81		
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
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**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 # 261483

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-5  
42312  
NW 14-15-20  
08-16-2013  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	119.00	11.5000	1368.50
1118B	PREMIUM GEL / BENTONITE	300.00	.2200	66.00
1111	SODIUM CHLORIDE (GRANULA	240.00	.3900	93.60
1110A	KOL SEAL (50# BAG)	595.00	.4600	273.70
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
369 80 BBL VACUUM TRUCK (CEMENT)	2.50	90.00	225.00
510 MIN. BULK DELIVERY	1.00	368.00	368.00
666 CEMENT PUMP	1.00	1085.00	1085.00
666 EQUIPMENT MILEAGE (ONE WAY)	20.00	4.20	84.00
666 CASING FOOTAGE	860.00	.00	.00

Parts:	1854.93	Freight:	.00	Tax:	132.63	AR	3749.56
Labor:	.00	Misc:	.00	Total:	3749.56		
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 SW SW NE, Sec 14, T 15 S, R 20 EW

NW-NP

Repressuring

3135 Feet from South Section Line

Flood

2145 Feet from East Section Line

Tertiary

Date injection started \_\_\_\_\_

Lease Neumer Well # AI-5

API #15 -045 -22,015

County Douglas

Operator: Altavista Energy Inc.

Operator License # 34350

Name & Address P.O. Box 128

Contact Person Doug Evans

Wellsville, KS 66092

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
	7"	2 7/8"			
Set at	68'	860.65		Set at	
Cement Top	Circ	Circ		Type	
" Bottom	68'	860.65			
DV/Perf.		TD (and plug back)		880	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 I E L D	Time: Start	Min.	Min.	Min.	Set up 1	System Pres. during test
	1:15	10	20	30		
	Pressures:	800	800	800	Set up 2	Annular Pres. during test
	1:45				Set up 3	Fluid loss during test _____ bbls.

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 860.65 feet

was the zone tested David Nelson Signature Contractor Title

The results were Satisfactory , Marginal \_\_\_\_\_, Not Satisfactory \_\_\_\_\_

State Agent Taylor Herman Title Pertit Witness: Yes \_\_\_\_\_ No

REMARKS: Pressured well up to 800#

Origin. Conservation Div.;  KDHE/T;  Dist. Office;

Computer Update

SEP 12 2013