



KANSAS CORPORATION COMMISSION 1166770
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: _____



1166770

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 A-1
Lease Owner: Altavista

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

Commenced Spudding:
7-31-2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-5	soil-clay	5
75	sandstone	80
97	shale	177
5	lime	182
6	shale	188
15	lime	203
9	shale	212
7	lime	219
5	shale	224
17	lime	241
4	shale	245
31	sandstone	276
17	lime	293
22	sandy shale	315
54	shale	369
22	lime	391
17	shale	408
8	lime	416
, 16	shale	432
7	sand	439
17	lime	456
6	shale	462
1	lime	463
13	shale	476
23	lime	499
9	shale	508
23	lime	531
4	shale	535
4	lime	539
4	shale	54
5	lime	548
12	shale	560
7	sand	567
26	shale	593
57	sand	650
32	shale	682
25	sand	707
61	shale	768
7 5	lime	773
9	shale	782

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-1

Farm Neumer

KS Douglas
(State) (County)

14 15 20
(Section) (Township) (Range)

For Alta Vista 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
0-5	soil-clay	5	
75	sandstone	80	
97	shale	177	40' - water
5	Lime	182	
6	shale	188	
15	Lime	203	
9	shale	212	
7	Lime	219	
5	shale	224	
17	Lime	241	
4	shale	245	
31	sand	276	no oil
17	Lime	293	
22	sandy shale	315	
54	shale	369	
22	Lime	391	
17	shale	408	
8	Lime	416	
16	shale	432	
7	sand	439	odor
17	Lime	456	
6	shale	462	
1	Lime	463	
13	shale	476	
23	Lime	499	
9	shale	508	
23	Lime	531	



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 # 261119

Invoice Date: 07/31/2013 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-1
42294
14-15-20
07-31-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	40.00	11.5000	460.00
1118B	PREMIUM GEL / BENTONITE	68.00	.2200	14.96
1111	SODIUM CHLORIDE (GRANULA	87.00	.3900	33.93
1110A	KOL SEAL (50# BAG)	200.00	.4600	92.00
	Description	Hours	Unit Price	Total
369	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	92.00	.00	.00
548	MIN. BULK DELIVERY	.50	368.00	184.00

Parts: 600.89 Freight: .00 Tax: 42.97 AR 1832.86
Labor: .00 Misc: .00 Total: 1832.86
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 # 261203
=====

Invoice Date: 08/15/2013 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-1
42321
NW14-15-20
08-01-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	112.00	11.5000	1288.00
1118B	PREMIUM GEL / BENTONITE	288.00	.2200	63.36
1111	SODIUM CHLORIDE (GRANULA	217.00	.3900	84.63
1110A	KOL SEAL (50# BAG)	560.00	.4600	257.60
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
370	80 BBL VACUUM TRUCK (CEMENT)	1.50	90.00	135.00
495	CEMENT PUMP	1.00	1085.00	1085.00
495	EQUIPMENT MILEAGE (ONE WAY)	25.00	4.20	105.00
495	CASING FOOTAGE	910.00	.00	.00
548	MIN. BULK DELIVERY	.50	368.00	184.00

=====
Parts: 1746.72 Freight: .00 Tax: 124.89 AR 3380.61
Labor: .00 Misc: .00 Total: 3380.61
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

261203

TICKET NUMBER 42321

LOCATION Ottawa KS

FOREMAN Fred Maden

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
8-1-13	3244	Newman # A-1	NW 14	15	20	DC

CUSTOMER <u>Altavista Energy</u>		
MAILING ADDRESS <u>P.O. Box 128</u>		
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66082</u>

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fred Mad		
495	Har Bec		
370	Kei Car		
548	Milk Hec		

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 920 CASING SIZE & WEIGHT 2 3/8 EUE
 CASING DEPTH 910 DRILL PIPE Baffle in TUBING @ 878 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2 Plug +
 DISPLACEMENT 5.1 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Hold crew meeting. Establish pump rate. Mix + Pump 1/2 Gal HE-100
Polymer. Circulate to condition hole. Mix + Pump 100# Gal
Flush. Mix + Pump 112 SKs 50/50 Poz Mix Cement 2% Gal 5% Salt
5# Kal Seal/sk. Cement to surface. Flush pump + lines clean.
Displace 2 1/2" Rubber plug to Baffle. Pressure to 800# PSI
Release pressure to set Float Valve. Shut in casing

T.O.S Drilling.

Fred Maden

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	910'	Casing Footage		N/C ✓
5407	1/2 Minimum	Ten Miles	548	184 ⁰⁰ ✓
5502C	1 1/2 hr	80 BBL Vac Truck	370	135 ⁰⁰ ✓
1124	112 SKs	50/50 Poz Mix Cement		1288 ⁰⁰ ✓
1118B	258#	Premium Gel		63 ⁶⁰ ✓
1111	217#	Granulated Salt		84 ⁶⁰ ✓
1110A	560#	Kal Seal		257 ⁶⁰ ✓
4402	1	2 1/2" Rubber Plug		29 ⁵⁰ ✓
1401	1/2 Gal	HE-100 Polymer		23 ⁶⁰ ✓
			7.15%	SALES TAX
				ESTIMATED
				TOTAL
				124 ⁸⁰ ✓
				3380 ⁶¹ ✓

Completed

Revin 3737

AUTHORIZATION No Co Rep on Site 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.