

Kansas Corporation Commission Oil & Gas Conservation Division

1166780

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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
☐ New Well ☐ Re-Entry ☐ Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	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: sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator: Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec TwpS. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	

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 I II Approved by: Date:

Side Two



Operator Name:			Lease Name: _			_ Well #:		
Sec Twp	S. R	East West	County:					
time tool open and clo	osed, flowing and shu es if gas to surface te	d base of formations pen t-in pressures, whether s st, along with final chart(well site report.	hut-in pressure rea	ched static level,	hydrostatic press	sures, bottom h	ole temperature, fluid	
Drill Stem Tests Taker (Attach Additional		Yes No		og Formatio	n (Top), Depth ar	nd Datum	Sample	
Samples Sent to Geological Survey		Nam	е		Тор	Datum		
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Copy	d Electronically	Yes No Yes No Yes No						
List All E. Logs Run:								
		Report all strings set-o		ermediate, producti	<u> </u>			
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 / SQL	 JEEZE RECORD				
Purpose: —— Perforate —— Protect Casing	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Percent Additives			
Plug Back TD Plug Off Zone								
	DEDEODATI	ON DECORD - Deider Blue	- O-4/T	Acid Fro	cture, Shot, Cemen	t Causana Dagar		
Shots Per Foot	Specify I	ON RECORD - Bridge Plug Footage of Each Interval Per	forated		mount and Kind of Ma		Depth	
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or EN	HR. Producing Meth		Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wat	er B	bls.	Gas-Oil Ratio	Gravity	
DISPOSITI	ON OF GAS:		METHOD OF COMPLE	ETION:		PRODUCTIO	ON INTERVAL:	
Vented Solo		Open Hole	Perf. Dually	Comp. Cor	nmingled			
(If vented, Su	bmit ACO-18.)	Other (Specify)	(Submit)	4CO-5) (Sub	mit ACO-4)		_	

WELL LOG

Thickness of Strata	Formation	Total Depth
0-4	soil-clay	4
74	sandstone	78
87	shale	165
4	lime	169
7	shale	176
15	lime	191
8	shale	199
7	lime	206
4	shale	210
19	lime	229
5	shale	234
30	sandstone	264
17	lime	281
20	sandy shale	301
55	shale	3569
22	lime	378
13	shale	391
5	shale & lime	396
6	lime	402
15	shale	417
10	sand	427
17	lime	444
5	shale	449
1	lime	450
13	shale	463
25	lime	488
6	shale	494
23	lime	517
5	shale	522
4	lime	526
4	shale	530
6	lime	536
7	shale	543
9	sand	552
28	shale	580
62	sand	642
33	shale	675
9	sand	684
73	shale	757
2	lime	759

Lease Owner:Altavista

Douglas County, KS Town Oilfield Service, Inc. Commenced Spudding: Well:Neumer A-3 (913) 837-8400 7-29-2013

14	shale	773
4	lime	777
17	shale	794
2	lime	796
3	shale	799
2	sandy shale	800
2	sand	802
2	sandy lime	804
1	sand	
4		805
2	sand	809
	sand	811
4	sand	815
2	sand	817
2	sand	819
101	sandy shale	920-TD
·		
•		
,		
-		
L	L	

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals D²x.14xh 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 - RPMxd over SPMxR

d - SPMxRxD over RPM

SPM - RPMXD over RxD

R - RPMXD over SPMxD

BELT LENGTH - 2C + 1.57(D + d) + $\frac{(D-d)^2}{4C}$

* Need these to figure belt length

TO FIGURE AMPS:

WATTS = AMPS

746 WATTS equal 1 HP

Log Book

Well No.	1-5	
Farm Neu	iner	
(State)	D	County)
(Section)	(Township)	Range)
For Altavi	Sta Ene (Well Owner)	cgy inc

Town Oilfield Services, Inc.

1207 N. 1st East Louisburg, KS 66053 913-710-5400

	Booky Vi	10 Longsting
Nomer Farm: Daylas County		,,,,,,
ES State; Well No. A-3	CASING A	ND TUBING MEASUREMENTS
- 10 (0(.	Feet In.	Feet In. Feet In
Commenced Spuding July 29 20 13 Finished Drilling July 31 20 13	800.95	Seat 1001e
Finished Drilling July 131		66
Driller's Name Wesley Dollard	863.45	Ba+10
Driller's Name	COULD	
Driller's Name	594.25	+lon +
Tool Dresser's Name Kyan Ward		
Tool Dresser's Name Green Pelly		1
Tool Dresser's Name		10
Contractor's Name		
14 15 20		
(Section) (Township) (Range)		
Distance from line, 3795ft.		
Distance from S line, 3745ft. Distance from E line, 1815ft.		
10 hrs		
CASING AND TUBING		
RECORD		
· ·		
10" Set 10" Pulled		
8" Set 8" Pulled		
769/4" Set 61/4" Pulled		
4" Set 4" Pulled		
2" Set 2" Pulled		

Brecke 4:00 surface

-1-

Thickness of	F	Total	
Strata	Formation	Depth	Remarks
0-4	Soil- clay	4	
74	sand stenje	78	34'- water
87	3halz	165	24 - Water
4	Lime	169	
7	Shale	176	*
15	Lime	191	
8	Shele	199	
7	Lime	206	
4	shale	210	
19	Lime	229	
5	Shale	234	
30	sand	264	no oil
17	Lime	281	- 76 011
20	sandy shale	301	
55	Shale	356	
22	Lime	378	
13	Shale	391	
5	Shale & Lime	396	
	Lime	402	
15	Shale	417	
10	Sand	427	423 - 427 - slight show
17	Lime	444	THE TREE STIGHT SHOW
5	shale	449	
	Lime	450	
13	Shale	463	
25	Lime	488	469-011
6	Shale	494	101-011
	-2-		

		494	
Thickness of Strata	Formation	Total Depth	
23	Lime	517	Remarks
5	Shale	522	
4	Lime	526	
4	Shale	530	
6	Lime	536	¥
7	Shale	543	Heitha
9	Sand	552	. 01
28	Shale	580	no 0.1
62	Sand	642	
33	Shale	675	- Some sandy shale - no Oil
9	Sand	684	-
73	Shale	757	nc Oil
2	Lime	759	
14	Shale	773	
4	Lime	777	
17	Shale	794	
2	Lime	796	
3	Shale	799	
2	sandy shale	800	
2	sand	802	no oil
2	sandy lime	804	no Oil
/	Sand	805	broken -50% 0:1
4	Sand	809	
2	sand	811:	broken - 75% Oil Peit
4	sand	815	no Oil
2	sand		solid - good show
2	Squel	819	no DI
	-4-		

-5-

819

		01-1	
Thickness of Strata	Formation	Total Depth	Remarks
101	sandy shele	920	TD
	8		
		8	
	•		

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 #

261061

_______ Invoice Date:

07/30/2013

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-3 42258 14-15-20 07-29-2013 KS

			========	========	========
Part 1	Number	Description	Qty	Unit Price	Total
1124		50/50 POZ CEMENT MIX	45.00	11.5000	517.50
· 1118B		PREMIUM GEL / BENTONITE	76.00	.2200	16.72
1111		SODIUM CHLORIDE (GRANULA	91.00	.3900	35.49
1110A		KOL SEAL (50# BAG)	225.00	.4600	103.50
00 TO 11 TO 17 TO	Description		Hours	Unit Price	Total
368		URFACE)	1.00	870.00	870.00
368	EQUIPMENT MILE	AGE (ONE WAY)	.00	4.20	.00
368	CASING FOOTAGE		89.00	.00	.00
548	MIN. BULK DELI	VERY	.50	368.00	184.00
675	80 BBL VACUUM	TRUCK (CEMENT)	1.00	90.00	90.00

_______ Parts: 673.21 Freight: .00 Tax: 48.14 AR 1865.35 .00 Misc: Labor:

.00 Total: 1865.35 Sublt: .00 Supplies: .00 Change: .00

Signed

Date



26/06/

TICKET NUMBER 422 LOCATION OHOMA KS FOREMAN Casey Kerned

FIELD TICKET & TREATMENT REPORT

	or 800-467-8676			CEMEN	T	OKI		
DATE	CUSTOMER#	WEL	L NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
7/29/13	3244	Neun	ner #A-	. 3	UW 14	15	20	DG
CUSTOMER	avista Ene	rau	•					
MAILING ADDRE	ESS	99		-	TRUCK#	DRIVER	TRUCK#	DRIVER
	Box 128	,			481	Casken	V Safaty	Marting
CITY	30 × 100	STATE	ZIP CODE	4	368	ArlMeD	V	
<u> </u>	1_	KS	40 55000		548	Miktha		
wellsvil	•		66092	ACCOUNTS AND A STATE OF THE SECOND OF THE SE	475	KeiDet	V	
JOB TYPE_Cu		HOLE SIZE	9/5"	HOLE DEPTH	90'	CASING SIZE & V	WEIGHT 7	
CASING DEPTH	•	DRILL PIPE	· · · · · · · · · · · · · · · · · · ·	_TUBING			OTHER	
SLURRY WEIGH		SLURRY VOL_			k	CEMENT LEFT In		
DISPLACEMENT	3-25 bbs	DISPLACEMEN	T PSI	MIX PSI		RATE 3 box	<u> </u>	
REMARKS: Le	ed rately.	neeting,	establish	ed eirc	lation in	ixed t pur	uped 45	des 5950
Parker	Plus put 1.3	100-	1 47.	C. H	1 1 V 100	- 1 1-	convert	
surface,	displaced	coment	w/ 3.2	5 6615 7	broch wat	er ecogo	Shot in a	
							19	
ACCOUNT CODE	QUANITY	or UNITS	DE	SCRIPTION of	SERVICES of PR	ODUCT	UNIT PRICE	TOTAL
54015	1		PUMP CHARG	E	1			870.00
5406	on lea	se .	MILEAGE		· · · · · · · · · · · · · · · · · · ·			570.
5402	89'		asing	footage				
5407		iniaum		ileage	-	-		10400
SSORC	/hi			ac				000
330*4				<u>.,. </u>				70.
1124	45 3	ks	50/50 F	ozanik a	sement			517,50
11183	76.	4	Premion		-372-			Notice of the second
,,,,,,,,	7 4		- I evion	- Coen				16.72

2,15% SALES TAX Ravin 3737 **ESTIMATED** TOTAL AUTHORIZTION BYST MY 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.

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 #

261118

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-3 42293 14-15-20 07-31-2013 KS

=======================================									
Part Number	Description	Otv	Unit Price	Total					
1124	50/50 POZ CEMENT MIX	108.00	11.5000	1242.00					
1118B	PREMIUM GEL / BENTONITE	282.00	.2200	62.04					
1111	SODIUM CHLORIDE (GRANULA	209.00	.3900	81.51					
1110A	KOL SEAL (50# BAG)	540.00	.4600	248.40					
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50					
1401	HE 100 POLYMER	.50	47.2500	23.63					
Descri	ntion	** *		400					
	STATE OF MADELLE MADELLE STATE OF STATE			Total					
369 80 BBL VACUUM TRUCK (CEMENT)		1.50	90.00	135.00					
495 CEMENT PUMP		1.00	1085.00	1085.00					
	IENT MILEAGE (ONE WAY)	25.00	4.20	105.00					
	FOOTAGE	894.00	.00	.00					
548 MIN. BULK DELIVERY		.50	368.00	184.00					

Parts: 1687.08 Freight: .00 Tax: 120.63 AR 3316.71

Labor:

.00 Misc:

.00 Total:

3316.71

Sublt:

.00 Supplies:

.00 Change:

.00

Signed

Date



261118

TICKET NUMBER_	42293
LOCATION OF	awa KS
FOREMAN Fre	

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

020 -101 0210				CINEIAI				
DATE	CUSTOMER#	WEL	L NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
7.31.13	3244	Newn	er # A-3		NW 14	15	20	DG
CUSTOMER	icta Fran			<u>,ari</u>	TRUCK#	DDIVER		
MAII NG ADDRESS							TRUCK #	DRIVER
P.O. Bax 128 495 Kill							-	1
CITY	ZIP CODE		495 369	Kei Car	 	 		
Wells	م الن	KS	66092			DerMas		— —
								- F 11 F
CASING DEPTH 894 DRILL PIPE BOFFLE IN TUBING 63 OTHER								
SLURRY WEIGH		SLURRY VOL		TER gal/sk		CEMENT LEET in	n CASING 3/	4 DL 14
	5.02 BBC	STANDS SEE				RATE SAP		* Plug
			Establis	DOM: Under	2 50 7	2 4		
Polym	er-Pircule	to boc	on dixton			mp 100#		
Mivx	Pumo		5 50/50 Po	M'v	James	750 (10 50	Les Files	4
Kals	-2/s/K.	Camen						
	1	No. 20 September 2015	plus to bat			pump + 1	ACI CLEAN	
N 1 F		10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	ex float		Or I	e to 8000	PO/	
1-0125	0 - pr + 35 c	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	21. 110001	vaxve :	2 m 1	n casing		
				V CONTRACTOR OF THE PARTY OF TH		· ·		
TOS	Drillia.	- 1486		39-19-1		7 000		
100	Dr. U.V.	12/ 5 \$				Luca Ma	de.	
ACCOUNT	QUANITY (or HMITS	DESCRI	DTION -4 CE				
CODE	QUARTIT			FIION OF SE	RVICES or PR		UNIT PRICE	TOTAL
5401		<i></i>	PUMP CHARGE			495		108500
2706		25mi	MILEAGE		<u>.</u>	495		10500
5402		94	Casing fo	sa Noge				NIC
5407	1/2 Minin		Ton Mila			548		18400
<i>र</i> डकु ८	1	2 hr	80 BBL	Vac Tr	ck	369		13500
		112						
			45 1 1 2					
1124		085165	50/50 Pos	mry C	to many			12425
1115-B	2	82 €	Promium					
1111		209#	Granulax	last C.	04	· · · · · · · · · · · · · · · · · · ·		6204
1110 A		540#	Kol Smal	red on	**/			8151
4402		1	2/2" Rubi	has Pl.	10	1 3		24.40
1401	1/-	Gal	14 E . 100	Alman I	7			74 -
			1. 2. 700	rary must				্যঞ
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						7.158	SALESTAV	
lavin 3737				- Salasana		1130	SALES TAX ESTIMATED	120 63
		11	t				TOTAL	33/671
AUTHORIZTION_	No Co Rup	work s	TITLE	<u> </u>			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