



KANSAS CORPORATION COMMISSION 1166817
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: _____

1166817



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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Douglas County, KS
 Well:Neumer A-6
 Lease Owner:Altavista

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

Commenced Spudding:
 7-24-2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-8	soil-clay	8
47	sandstone	55
90	shale	145
5	lime	150
5	shale	155
15	lime	170
7	shale	177
8	lime	185
4	shale	189
17	lime	206
6	shale & lime	212
32	sand	244
15	lime	259
25	sandy shale	284
51	shale	335
22	lime	357
13	shale	370
5	shale & lime	375
7	lime	382
16	shale	398
8	sand	406
15	lime	421
5	shale	426
1	lime	427
14	shale	441
23	lime	464
9	shale	473
22	lime	495
4	shale	499
4	lime	503
4	shale	507
6	lime	513
11	shale	524
6	sand	530
28	shale	558
62	sand	620
43	shale	663
5	sand	668
6	sandy shale	674
67	shale	741

Short Cuts

TANK CAPACITY

BBLs. (42 gal.) equals $D^2 \times h$

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH 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 - $\text{RPM} \times d$ over $\text{SPM} \times R$

d - $\text{SPM} \times R \times D$ over RPM

SPM - $\text{RPM} \times D$ over $R \times D$

R - $\text{RPM} \times D$ over $\text{SPM} \times d$

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

* Need these to figure belt length

TO FIGURE AMPS: $\frac{\text{WATTS}}{\text{VOLTS}} = \text{AMPS}$

746 WATTS equal 1 HP

Log Book

Well No. A-6

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
0-8	soil-clay	8	
47	sandstone	55	15' - water
90	shale	145	
5	lime	150	
5	shale	155	
15	lime	170	
7	shale	177	
8	lime	185	
4	shale	189	
17	lime	206	
6	shale & lime	212	
32	sand	244	no oil
15	lime	259	
25	sandy shale	284	
51	shale	335	
22	lime	357	
13	shale	370	
5	shale & lime	375	
7	lime	382	
16	shale	398	
8	sand	406	slight show
15	lime	421	
5	shale	426	
1	lime	427	
14	shale	441	
23	lime	464	
9	shale	473	

473

Thickness of Strata	Formation	Total Depth	Remarks
22	Lime	495	
4	shale	499	
4	Lime	503	
4	Shale	507	
6	Lime	513	Hertha
11	shale	524	
6	sand	530	no Oil
28	shale	558	
62	sand	620	no Oil
43	shale	663	
5	sand	668	no Oil
6	sandy shale	674	
67	shale	741	
3	Lime	744	
26	Shale	770	
1	Lime	771	
7	shale	778	
1	sandy shale	779	
2	sand	781	brown - gas cap
10	sand	791	mostly solid - good saturation
5	sand	796	broken - 50% oil
1	sand	797	no Oil perf - 782 - 796
103	sandy shale	900	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 # 260895

Invoice Date: 07/25/2013 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

NEVMER A-6
42237
14-15-20
07-24-2013
KS

Part Number	Description	Qty	Unit Price	Total
1126	OIL WELL CEMENT	25.00	19.7500	493.75
1107	FLO-SEAL (25#)	6.00	2.4700	14.82
	Description	Hours	Unit Price	Total
368	CEMENT PUMP (SURFACE)	1.00	870.00	870.00
368	EQUIPMENT MILEAGE (ONE WAY)	20.00	4.20	84.00
368	CASING FOOTAGE	67.00	.00	.00
548	MIN. BULK DELIVERY	1.00	368.00	368.00

Parts:	508.57	Freight:	.00	Tax:	36.36	AR	1866.93
Labor:	.00	Misc:	.00	Total:	1866.93		
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

260895

TICKET NUMBER 42237

LOCATION Alta Vista

FOREMAN Alan 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
7-27-13	3244	WEUMER A-6	NW 14	15	20	DB
CUSTOMER Alta Vista Energy			TRUCK #			
MAILING ADDRESS P.O. Box 128			DRIVER			
CITY Wellsville		STATE KS	ZIP CODE 66092	TRUCK #		
			DRIVER			

JOB TYPE Surface HOLE SIZE 9 7/8 HOLE DEPTH 68 CASING SIZE & WEIGHT 2"
 CASING DEPTH 67 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING yes
 DISPLACEMENT 2 1/2 DISPLACEMENT PSI 100 MIX PSI - RATE 4.5 gpm

REMARKS: Hooked to casing, Mixed & pumped 25 sk DWL plus 1/4# flo seal. Circulated cement. Displaced casing with clean water.

TDS, Was

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	368	870.00
5406	20	MILEAGE	368	84.00
5402	67'	casing footage	368	-
5407	min	ten miles	548	368.00
1126	25	DWL		493.75
1107	6#	flo seal		14.82
				completed
SALES TAX				36.36
ESTIMATED TOTAL				1866.93

NO company rep
AUTHORIZATION Jim Okie 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 # 260952

Invoice Date: 07/29/2013 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

NEVMER A-6
42234
14-15-20
07-25-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	105.00	11.5000	1207.50
1118B	PREMIUM GEL / BENTONITE	277.00	.2200	60.94
1111	SODIUM CHLORIDE (GRANULA	203.00	.3900	79.17
1110A	KOL SEAL (50# BAG)	525.00	.4600	241.50
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)	1.00	90.00	90.00
495 CEMENT PUMP	1.00	1085.00	1085.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	4.20	105.00
495 CASING FOOTAGE	872.00	.00	.00
503 MIN. BULK DELIVERY	.50	368.00	184.00

Parts: 1642.24 Freight: .00 Tax: 117.43 AR 3223.67
 Labor: .00 Misc: .00 Total: 3223.67
 Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

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