



KANSAS CORPORATION COMMISSION 1166820
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 A-7
 Lease Owner: Altavista

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

Commenced Spudding:
 7-22-2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-3	soil-clay	3
9	sandstone	12
18	shale	30
15	sand	45
87	shale	132
5	lime	137
5	shale	142
15	lime	157
8	shale	165
7	lime	172
4	shale	176
17	lime	193
3	shale & lime	196
14	shale	210
27	sand	237
11	lime	248
22	sandy shale	270
54	shale	324
21	lime	345
15	shale	360
5	shale & lime	365
7	lime	372
16	shale	388
7	sand	395
17	lime	412
4	shale	416
1	lime	417
14	shale	431
23	lime	454
8	shale	462
23	lime	485
4	shale	489
4	lime	493
5	shale	498
5	lime	503
13	shale	516
8	sand	524
22	shale	546
62	sand	608
32	shale	640

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-7

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

Neumer Farm: Douglas County
KS State; Well No. A-7

Elevation 1036

Commenced Spudding July 22 2013

Finished Drilling July 23 2013

Driller's Name Wesley Dollard

Driller's Name _____

Driller's Name _____

Tool Dresser's Name Ryan Ward

Tool Dresser's Name Greg Perry

Tool Dresser's Name _____

Contractor's Name TOS
14 15 20

(Section) (Township) (Range)
 Distance from S line, 2805 ft.

Distance from E line, 2145 ft.

10 hrs

Mike 4:00 Surface
 Brooke 4:00 Lungstring

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
771		Seat nipple			
836		Baffle			
866		float			

CASING AND TUBING
 RECORD

10" Set _____ 10" Pulled _____
 8" Set _____ 8" Pulled _____
 7 3/4" Set 72 6 1/4" Pulled _____
 4" Set _____ 4" Pulled _____
 2" Set _____ 2" Pulled _____

Thickness of Strata	Formation	Total Depth	Remarks
0-3	soil-clay	3	
9	sandstone	12	
18	shale	30	
15	sand	45	water
87	shale	132	
5	lime	137	
5	shale	142	
15	lime	157	
8	shale	165	
7	lime	172	
4	shale	176	
17	lime	193	
3	shale & lime	196	
14	shale	210	
27	sand	237	no oil
11	lime	248	
22	sandy shale	270	
54	shale	324	
21	lime	345	
15	shale	360	
5	shale & lime	365	
7	lime	372	
16	shale	388	
7	sand	395	odor - no show
17	lime	412	
4	shale	416	
1	lime	417	

417

Thickness of Strata	Formation	Total Depth	Remarks
14	Shale	431	
23	Lime	454	
8	Shale	462	
23	Lime	485	
4	Shale	489	
4	Lime	493	
5	Shale	498	
5	Lime	503	Hertha
13	Shale	516	
8	sand	524	no Oil
22	Shale	546	
62	sand	608	some sandy shale - no Oil
32	Shale	640	
17	sand	657	no Oil
6	sandy shale	663	
60	Shale	723	
3	Lime	726	
11	Shale	737	
2	Lime	739	
3	Shale	742	
6	Lime	748	
21	Shale	769	
4	sand	773	broken - brown - no Oil
2	sand	775	50% Oil - good show
4	sand	779	solid - great saturation
5	sand	784	broken - good show
1	sand	785	mostly solid - good show



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 # 260814

Invoice Date: 07/23/2013 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-7
42194
14-15-20
07-22-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	40.00	11.5000	460.00
1118B	PREMIUM GEL / BENTONITE	67.00	.2200	14.74
1111	SODIUM CHLORIDE (GRANULA	84.00	.3900	32.76
1110A	KOL SEAL (50# BAG)	200.00	.4600	92.00

Description	Hours	Unit Price	Total
548 MIN. BULK DELIVERY	.50	368.00	184.00
666 CEMENT PUMP (SURFACE)	1.00	870.00	870.00
666 EQUIPMENT MILEAGE (ONE WAY)	.00	4.20	.00
666 CASING FOOTAGE	72.00	.00	.00
675 80 BBL VACUUM TRUCK (CEMENT)	1.00	90.00	90.00

=====
Parts: 599.50 Freight: .00 Tax: 42.86 AR 1786.36
Labor: .00 Misc: .00 Total: 1786.36
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____



260814

TICKET NUMBER 42194
 LOCATION Okhara, KS
 FOREMAN Casey Kennedy

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
7/22/13	3244	Newmar # A-7	NW 14	15	20	DG

CUSTOMER <u>Altavista Energy</u>		
MAILING ADDRESS <u>PO Box 128</u>		
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66692</u>

TRUCK #	DRIVER	TRUCK #	DRIVER
481	Cashen		
666	Gar Moo		
548	Dan Det		
675	Kei Det		

JOB TYPE log spot surface HOLE SIZE 9 1/2" HOLE DEPTH 73' CASING SIZE & WEIGHT 7"
 CASING DEPTH 72' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 12'
 DISPLACEMENT 2.5 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 40 sks 50/50 Pozmix cement w/ 2% gel, 5% salt, & 5# Kolseal per sk, cement to surface, displaced cement w/ 2.5 bbls fresh water, shut in casing.

Handwritten signature

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE		870. ⁰⁰
54016	on lease	MILEAGE		
5402	72'	casing footage		
5407	1/2 minimum	tax mileage		184. ⁰⁰
5502C	1 hr	SD Vac		90. ⁰⁰
1124	40 sks	50/50 Pozmix cement		460. ⁰⁰
1118B	67 #	Premix col		14. ⁷⁴
1111	84 #	Salt		32. ⁷⁶
1110A	200 #	Kolseal		92. ⁰⁰
			SALES TAX	42. ⁸⁶
			ESTIMATED TOTAL	1786. ³⁶

completed

AUTHORIZATION Bryan Kelly 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 # 260841

Invoice Date: 07/24/2013 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-7
42225
14-15-20
07-23-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	102.00	11.5000	1173.00
1118B	PREMIUM GEL / BENTONITE	272.00	.2200	59.84
1111	SODIUM CHLORIDE (GRANULA	197.00	.3900	76.83
1110A	KOL SEAL (50# BAG)	510.00	.4600	234.60
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
369 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
495 CEMENT PUMP	1.00	1085.00	1085.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	4.20	105.00
495 CASING FOOTAGE	866.00	.00	.00
548 MIN. BULK, DELIVERY	1.00	368.00	368.00

Parts: 1597.40 Freight: .00 Tax: 114.21 AR 3449.61
Labor: .00 Misc: .00 Total: 3449.61
Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

260841

TICKET NUMBER 42225

LOCATION Ottawa KS

FOREMAN Fred Mad

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
7-23-13	3244	Naumer # A-7	NW 14	15	20	D6

CUSTOMER		TRUCK #	DRIVER	TRUCK #	DRIVER
Altavista Energy Inc		712	Fred Mad		
MAILING ADDRESS		495	Kei Kar		
P.O. Box 128		369	Der Mas		
CITY		548	Mikita		
Wellsville	STATE				
	KS				
	ZIP CODE				
	66092				

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 860' CASING SIZE & WEIGHT 2 7/8 EUE
CASING DEPTH 866 DRILL PIPE Baffle in TUBING @ 834 OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 31' + Plug
DISPLACEMENT 4.85 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Hold crew meeting. Establish pump rate - Pump 1/2 Gal HE 100 Polymer. Circulate to condition hole. Mix + Pump 100# Gel Flush. Mix + Pump 102 sks 50/50 Poz Mix Cement 2% Gel 5% Salt 5# Kol 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.

TOS Drilling. Wes.

Fred Mad

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085 ⁰⁰
5406	25mi	MILEAGE	495	105 ⁰⁰
5402	866	Casing footage		N/C
5407	Minimum	Ten Miles	548	368 ⁰⁰
5502C	2 hrs	80 BBL Vac Truck	369	180 ⁰⁰
1124	102 sks	50/50 Poz Mix Cement		1123 ⁰⁰
1118B	272#	Premium Gel		579 ⁸⁴
1111	197#	Granulated Salt		76 ⁸³
1110A	510#	Kol Seal		234 ⁶⁰
4402	1	2 1/2" Rubber Plug		89 ⁵⁰
1401	1/2 Gal	HE 100 Polymer		23 ⁶³
			7.15%	SALES TAX
				114 ²¹
				ESTIMATED TOTAL
				3449 ⁶¹

completed

Ravin 3737

AUTHORIZATION Bryan Kelly

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.