Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1173660

Form ACO-1 August 2013 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:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
GG GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
	If yes, show depth set: Feet
If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from:
Operator:	
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp S. R East West
Recompletion Date Recompletion Date	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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

	Page Two	1173660
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	
INCTRUCTIONS. Chain important tang of formations panetrated De	tail all aaraa Bapart all final	apping of drill stome tools giving interval toolad, time tool

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken (Attach Additional She	eets)	Yes No		-	on (Top), Depth a		Sample
Samples Sent to Geolog	gical Survey	Yes No	Name	9		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
			RECORD Ne		ion, etc.		
Purpose of String	Size Hole Size Casing Weight Setting Type of # Sacks Type and Pe					Type and Percent Additives	
		ADDITIONAL	CEMENTING / SQU	EEZE RECORD			
Purpose:	Depth					-	

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Back TD				
Plug Off Zone				

No

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No	(If No, skip questions 2 and 3)
No	(If No, skip question 3)

(If No, fill out Page Three of the ACO-1)

Shots Per Foot		PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated					٨		ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	b: Size: Set At: Packer At:				r At:	Liner Ru	un:	No		
Date of First, Resumed	I Producti	ion, SWD or ENHF	ł.	Producing N		ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bbl	S.	. Gas Mcf Wat		er	Bbls.	Gas-Oil Ratio	Gravity	
									I	
DISPOSITI	SITION OF GAS: METHOD OF COMPLE			TION:		PRODUCTION INT	ERVAL:			
Vented Solo	d 🗌 l	Used on Lease		Open Hole	Perf.	Uually (Submit A		Commingled		
(If vented, Su	ıbmit ACC	D-18.)		Other (Specify))	(Subinit /	,	(Submit ACO-4)		

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Douglas County, KS Well:Baldwin Unit AI-29 (913) 837-8400 Commenced Spudding: 11/14/2013 Lease Owner: Altavista

WELL LOG

Thickness of Strata	Formation	Total Depth
0-42	soil/clay	42
135	shale	177
5	lime	182
8	shale	190
14	lime	204
7	shale	211
7	lime	218
6	shale	224
22	lime	246
29	shale	275
17	lime	292
18	sadny shale	310
55	shale	365
22	lime	387
17	shale	404
8	lime	412
13	shale	425
10	sand	435
,18	lime	453
18	shale	471
23	lime	494
7	shale	501
24	lime	525
5	shale	530
4	lime	534
4	shale	538
8	lime	546
166	shale	712
6	lime	718
18	shale	736
1	lime	737
21	shale	758
4	lime	762
5	shale	767
2	lime	79
10	shale	779
1	lime	780
21	shale	801
2	lime	803
1	shale	804

Lease Owner: Altavista

Douglas County, KS Town Oilfield Service, Inc. Well:Baldwin Unit AI-29 (913) 837-8400

Commenced Spudding: 11/14/2013

2	line	
2 2	lime	806
2	shale	808
	sandy shale	812
28	sand	840
23	sand	863
97	shale	960-TD
		-
•		
	20 - 2016 (1	

Short Cuts

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

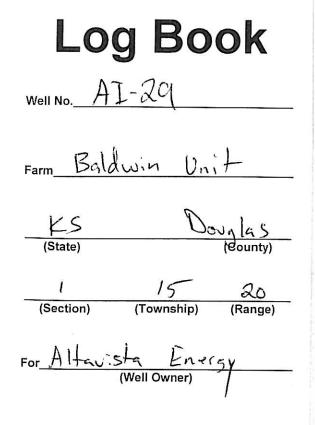
HP equals BPH x PSI x .0004 BPH - barrels per hour PSI - pounds square inch

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) + (D-d)² 4C

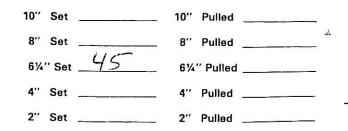
* Need these to figure belt length WATTS = AMPS TO FIGURE AMPS: VOLTS 746 WATTS equal 1 HP



Town Oilfield Services, Inc. 1207 N. 1st East Louisburg, KS 66053 913-710-5400

Baldwin Unit County ks 29 State; Well No. 1071 Elevation_ 11-14 2013 Commenced Spuding Finished Drilling Driller's Name **Driller's Name** Driller's Name Tool Dresser's Name Tool Dresser's Name Gn **Tool Dresser's Name** TOS Contractor's Name 15 ZÒ (Section) (Township) (Range) Distance from line. ft È 47 _ line, Distance from ft. 6 saches Shis

CASING AND TUBING RECORD



CASING AND TUBING MEASUREMENTS

		NECTOR TON			-
Feet	In.'	Feet	In.	Feet	ln.
916,	70	Bati	le		
946.	30	FLoc	F		711
				a	TX
					10
					1
					1
-					
					-
					<u></u>

-1-

Thickness of Strata	Formation	Total Depth	
0-42	So clay	42	Remarks
135	Shale	177	
	Shale Lime	152	
8	Shale	190	
14 7	Lime	204	-}
7	Shal e	211	
7	lime Shale	215	
6	Shall	224	-
22	Lime	246	Shells
29	Shale	275	Sandy
17	Lime	292	
14	sandy shale Shale	310	
55	Shale	365	
22	Lime	387	
17	Shale	404	
8	Lime	412	
13	Shall	425	
10	Sincl	435	ho oil
18	Lime	453	
145	Shale	471	
23	Lime	494	
7	Shale	501	
24	Lime	525	
5	Shale	530	
4	Lime	534	-
4	Shale	538	-
2	-2-	546	Heitha

-3-

Thickness of	Formation	546 Total	
Strata	Shalle	Depth 712	Remarks
166	Lime	718	
- 6	Shale	736	
	Lime		-
- 21	Shale	737	-
		758	-
4	Lime	762	-
5	shale	767	-
2	Lime	769	-
10	Shale	779	
	Lime	780	-
21	shale	801	
2	Lime	803	
1	Shale	804	
a	Lime	806	
2	5491-6	808	
4	Sandy shale	\$12	
28	Sand	840	brown laminated - odo! - no:
23	Sind	863	
97	shal-e	960	TD solid good Saturation - per-
			*
			† <u>-</u>
			f
			t 21
			Ť
	······································		†-
			t

CONSOLII Oil Well Serv	Concellated Oll M	/ell Services, LLC 970 < 4346	MAIN OFFICE P.O. Box 884 Chanute, KS 66720 620/431-9210 • 1-800/467-8676 Fax 620/431-0012		
INVOICE			Invoice #	264047	
Invoice Date: 11/20	/30	============== P	======== age 1		
ALTAVISTA ENERG 4595 K-33 HIGHW P.O. BOX 128 WELLSVILLE KS (785)883-4057		BALDWIN UNIT 44821 SE 1-15-20 11-15-2013 KS	AI-29		
Part Number 1124 1118B 1111 1110A 1401 4402	112450/50 POZ CEMENT MIX118BPREMIUM GEL / BENTONITE111SODIUM CHLORIDE (GRANULA110AKOL SEAL (50# BAG)1401HE 100 POLYMER			Total 1552.50 93.94 101.79 310.50 23.63 29.50	
Description 370 80 BBL VACUUM 558 MIN. BULK DELI 666 CEMENT PUMP 666 EQUIPMENT MILE 666 CASING FOOTAGE	VERY	2.50 1.00	Unit Price 90.00 368.00 1085.00 4.20 .00	Total 225.00 368.00 1085.00 84.00 .00	

========	==========	=======================================	=========	==========	===========	======	
Parts:	2111.86	Freight:	.00	Tax:	151.00	AR	4024.86
Labor:	.00	Misc:	.00	Total:	4024.86		
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						TICKET NUMBER 44821			
OIN WOM Services, LLC 264047				TICKET NUMBER 44821					
						FOREMAN (ase, Kouned			
PO Box 884, Chanute, KS 66720 FIELD TICKET & TREATMENT REPORT									
620-431-9210 or 800-467-8676 CEMENT									
DATE	CUSTOMER #	_	ELL NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY	
CUSTOMER	3 3244	Baldu	Jin Unit #	AI-29	SE 1	15	20	DG	
Al-	tavista Ener	24			TRUCK #				
MAILING AD		77-			729	DRIVER Casken	TRUCK#	DRIVER	
Po	- TON INV				lelelo	GarMan	V sately	Aleeting	
		STATE	ZIP CODE		558	Mat Car	V V		
Wells		KS	66092		370	Jas Ric	V	+	-
		HOLE SIZE	5 5/8"	HOLE DEPTH	960'	CASING SIZE &	WEIGHT 27	EVE	-
CASING DEP		DRILL PIPE_		TUBING ba	He-914		OTHER		<u> </u>
SLURRY WEI		SLURRY VOL	1	WATER gal/sl	¢	CEMENT LEFT in		1	
REMARKS:	1 AA Cal			MIX PSI	•	RATE 4.5	pm		
circulat	ad soll A	reeting,	established	- cicade	ation, min	ked + pur	meed 12	Gal Polyn	ser.
get fall	wet by 10	1110 f	resh water	tion hol	e, nixeo	+ pumpo	d 200 #	Premio	in a
concert	w/ 22 a	0 5%	Solt +	SA V	T Pull	- Line	Sks 50	Poznis	۲_
flushed	sump clean	Duma	od 210	ubber a	streat per	SK, Cel	neut to	Surface,	<u> </u>
water.	pressured to	600	PSI rola	and be	contro pl	attle w/	S. 30 66	is these	
	1		, , , , , , , , , , , , , , , , , , , ,	GRO PI	enore , ou	up in ca	sing -		
·							Λ)	-
·							1 Le)	_
ACCOUNT								······	<u> </u>
CODE	QUANITY or	r UNITS	DES	CRIPTION of S	SERVICES or PRO	DUCT	UNIT PRICE	TOTAL	٦.
5401	1		PUMP CHARGE					160- 00	
5406	20 mi		MILEAGE			······	·	0100	-
54002			casing to	oface				01	
5407	minin		casing the ton and SO Vac	lease	_			368.00	
55020	2.51	vrs	SO Vac					225.00	
								Q'831	-
10.0									1
1124	135 9		5%50 Po.	zurix c.	ement			1552.50	5/
1118B	427 +	<u>+</u>	Premium	Gol				93.94	
<u>////</u>	261 +	<u>+</u>	Salt					93.94 101.79	
(110A	(e75 =	Ħ	Kalonal					310.50	
1461	1/2 6	al	Polymer 2/5" ~					23.63	V
4402			a/2" ~0	ber plu	9			29.50	r
				· /]
					E.			1	
					<u></u>				-
						- Lond			1,
					· · · · ·	7.15%	CALCO TAV	15100	1
avin 3737						+15/0	SALES TAX	151,00	
UTHORIZTION	1						TOTAL	4024.86	1
		12	Th	'LE			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.

1