

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1187255

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 # _____

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
- ☐ Plug Back ☐ Conv. to GSW ☐ Conv. to Producer
- ☐ 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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

☐ Confidentiality Requested

Date: _____

☐ Confidential Release Date: _____

☐ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

ALT ☐ I ☐ II ☐ III Approved by: _____ Date: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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 <i>(Attach Additional Sheets)</i>	☐ Yes	☐ No	☐ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes	☐ No	Name	Top	Datum
Cores Taken	☐ Yes	☐ No			
Electric Log Run	☐ Yes	☐ No			
List All E. Logs Run:					

CASING RECORD ☐ New ☐ 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				

Did you perform a hydraulic fracturing treatment on this well? ☐ Yes ☐ No (If No, skip questions 2 and 3)

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? ☐ Yes ☐ No (If No, skip question 3)

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? ☐ Yes ☐ No (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		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)		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

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> ☐ Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	--	---

DRILLERS LOG

API NO: 15 - 031 - 23620 - 00 - 00

OPERATOR: ALTAVISTA ENERGY INC

ADDRESS: 4595 K-33 HWY, P.O. BOX 128, WELLSVILLE, KS 66092

WELL #: A - 3

LEASE NAME: WILFRED LEHMANN

FOOTAGE LOCATION: 3465 FEET FROM (N) (S) LINE 1155 FEET FROM (E) (W) LINE

CONTRACTOR: FINNEY DRILLING COMPANY

GEOLOGIST: DOUG EVANS

SPUD DATE: 9/16/2013

TOTAL DEPTH: 1086 P.B.T.D.

DATE COMPLETED: 9/18/2013

OIL PURCHASER: COFFEYVILLE RESOURCES

CASING RECORD

REPORT OF ALL STRINGS - SURFACE, INTERMEDIATE, PRODUCTION, ETC.

PURPOSE OF STRING	SIZE HOLE DRILLED	SIZE CASING SET (in O.D.)	WEIGHT LBS/FT	SETTING DEPTH	TYPE CEMENT	SACKS	TYPE AND % ADDITIVES
SURFACE:	12.2500	7	23	44.50	OWC	53	SERVICE COMPANY
PRODUCTION:	5.8750	2.8750	6.5	1077.83	OWC	123	SERVICE COMPANY

WELL LOG

CORES: # 1 - 989 - 1003

RECOVERED:

ACTUAL CORING TIME:

RAN: 3 - CENTRALIZERS

1 - FLOAT SHOE

1 - BAFFLE

1 - SEATING NIPPLE

1 - CLAMP

1 - COLLAR

FORMATION	TOP	BOTTOM
TOP SOIL	0	3
CLAY	3	25
SAND & GRAVEL	25	41
SHALE	41	194
LIME	194	257
SHALE	257	335
LIME	335	364
SHALE	364	368
LIME , '	368	370
SHALE	370	395
LIME	395	475
RED SHALE	475	483
SHALE	483	505
LIME	505	570
SHALE	570	574
LIME	574	600
SHALE	600	606
LIME	606	624
SHALE	624	785
LIME	785	788
SHALE	788	807
LIME	807	815
SHALE	815	822
LIME	822	829
SHALE	829	839
LIME	839	851
SHALE	851	872
LIME	872	882
SHALE	882	897
LIME	897	901
SHALE	901	917
LIME	917	921
SHALE	921	941
LIME	941	944
SHALE	944	953
LIME	953	955
SHALE	955	987
CAP LIME	987	988
SHALE	988	991
CAP LIME OIL	991	992
SAND & SHALE OIL	992	994.5

[illegible]



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 # 262421

Invoice Date: 09/19/2013 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

WILFRED LEHMANN A-3
42504
NE 23-22-16
09-16-2013
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	77.00	.3900	30.03
1110A	KOL SEAL (50# BAG)	200.00	.4600	92.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP (SURFACE)	1.00	870.00	870.00
368 EQUIPMENT MILEAGE (ONE WAY)	.00	4.20	.00
368 CASING FOOTAGE	44.50	.00	.00
548 TON MILEAGE DELIVERY	83.70	1.41	118.02
675 80 BBL VACUUM TRUCK (CEMENT)	1.50	90.00	135.00

Parts: 596.77 Freight: .00 Tax: 36.71 AR 1756.50
Labor: .00 Misc: .00 Total: 1756.50
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



FIELD TICKET & TREATMENT REPORT

TICKET NUMBER 42504
LOCATION Ottawa
FOREMAN Alan Mader

DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
9-16-13	3844	Wilfred Behman A.3		NE 23	22	16	CP
CUSTOMER Alta Vista Energy							
MAILING ADDRESS P.O. Box 128							
CITY	STATE		ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
Wellsville	KS		66092	516	Al Mad	568	Meet
				368	Al Mad		
				675	Kei Met		
				549	Mik Hag		

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 44.5 CASING SIZE & WEIGHT 7"
CASING DEPTH 44.5 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT 1 3/4 DISPLACEMENT PSI 100 MIX PSI — RATE 46 bpm
REMARKS: Hold meeting. Hooked to casing. Established rate. Mixed & pumped 40 sk 50/50 cement plus 200 gal, 570 salt, 5# Kalsol per sack. Circulated cement. Displaced casing with 1 3/4 bbl water. Closed valve.

Finney

Alan Moore

[illegible]

Rayin 3737

AUTHORIZATION Tim O'Sa

TITLE

DATE _____

SALES TAX	36.71
ESTIMATED TOTAL	1,756.50
DATE	8/17/56

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 # 262436

Invoice Date: 09/24/2013 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

WILFRED LEHMANN A-3
42520
NE 23-22-16
09-18-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	135.00	11.5000	1552.50
1118B	PREMIUM GEL / BENTONITE	327.00	.2200	71.94
1111	SODIUM CHLORIDE (GRANULA	261.00	.3900	101.79
1110A	KOL SEAL (50# BAG)	675.00	.4600	310.50
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1085.00	1085.00
495 EQUIPMENT MILEAGE (ONE WAY)	45.00	4.20	189.00
495 CASING FOOTAGE	1077.00	.00	.00
T-106 WATER TRANSPORT (CEMENT)	1.50	120.00	180.00
510 TON MILEAGE DELIVERY	282.49	1.41	398.31

Parts:	2066.23	Freight:	.00	Tax:	127.07	AR	4045.61
Labor:	.00	Misc:	.00	Total:	4045.61		
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

