

Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1193600

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:	S. R East West
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:, (e.gxxx.xxxxx)
Name:	
Wellsite Geologist:	
Purchaser:	Vell #:
Designate Type of Completion:	
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
□ OG □ GSW □ Temp.	Abd. Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to S	WD Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to P	
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	
ENHR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date	Quarter Sec TwpS. R East West
Recompletion Date 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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

	Page Iwo	1193600
Operator Name:	_ Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INCTRUCTIONS. Changing provident tang of formations parastrated D	stail all agree 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		Log Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolog		Yes No	Nar	ne		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASING Report all strings set-		lew Used termediate, producti	on, 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 / SC	UEEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and P	ercent Additives	
Protect Casing Plug Back TD							
Plug Off Zone							
Did you perform a hydraulic	fracturing treatment o	n this well?		Yes	No (If No, ski	p questions 2 an	d 3)

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

	(onap	queenene 2	
No	(If No,	skip	question 3)	

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

TUBING RECORD: Size: Set At: Packer At: Liner Run: TUBING RECORD: Size: Set At: Packer At: Liner Run: Date of First, Resumed Production, SWD or ENHR. Producing Method: Yes No									
Date of First, Resumed Production, SWD or ENHR. Producing Method:	Shots Per Foot				уре	A			Depth
Date of First, Resumed Production, SWD or ENHR. Producing Method:									
Date of First, Resumed Production, SWD or ENHR. Producing Method:									
Date of First, Resumed Production, SWD or ENHR. Producing Method:									
Date of First, Resumed Production, SWD or ENHR. Producing Method:									
Date of First, Resumed Production, SWD or ENHR. Producing Method:									
Estimated Production Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravit	UBING RECORD:	Size:	Set At:	Pacl	ker At:	Liner Ru		No	
	ate of First, Resumed F	Production, SWD or ENH	IR.		mping	Gas Lift	Other (Explain)		
		Oil E	Bbls.	Gas Mcf	Wat	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL:	DISPOSITIO	N OF GAS:	METHOD OF COMPLE			ETION:		PRODUCTION INTER	VAL:
Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4) Open Hole Open Hole Open Hole Open Hole			Op	pen Hole Perf.					
(If vented, Submit ACO-18.)	(If vented, Subi	mit ACO-18.)	Ot	ther (Specify)					

Yes

Yes

No

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

Douglas County, KS Well:Jim Bell A-10 Lease Owner:Altavista Town Oilfield Service, Inc. (913) 837-8400

Commenced Spudding: 12/13/2013

WELL LOG

Thickness of Strata Formation		Total Depth
0-21	soil-clay	21
2	lime	23
8	shale	31
4	lime	35
135	shale	170
8	lime	178
8	shale	186
14	lime	200
8	shale	208
7	lime	215
6	shale	221
39	lime	2630
4	shale	264
19	lime	283
72	shale	355
22	lime	377
17	shale	394
7	lime	401
' 15	shale	416
9	sand	425
20	lime	445
3	shale	448
2	lime	450
10	shale	460
25	lime	485
6	shale	491
25	lime	516
4	shale	520
4	lime	524
4	shale	528
5	lime	533
173	shale	706
8	lime	714
6	shale	720
5	lime	725
5	shale	730
7	lime	737
14	shale	751
5	lime	756
8	shale	764

Douglas County, KS Well:Jim Bell A-10 Lease Owner:Altavista Town Oilfield Service, Inc. (913) 837-8400

Commenced Spudding: 12/13/2013

0	sandy lime	772
<u> </u>	lime	777
19	shale	796
2	lime	798
2	shale	800
1	lime	801
5	shale	806
		809
3	sand sand	814
5		815
1	sandy lime	821
6	sand	900-TD
79	sandy lime	900-10
	a	
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

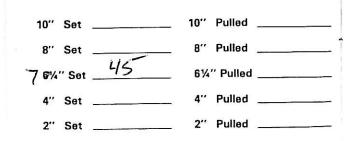
* Need these to figure belt length WATTS = AMPS VOLTS 746 WATTS equal 1 HP

Log	g Bo	ok
Well No. A	-10	
Farm Jim	Bell	
(State)	D	unlas (County)
(Section)	15 (Township)	20 (Range)
For Altavist	(Well Owner)	inc

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

Jim Bell 45 _ County Farm: KS State; Well No. 1045 Elevation 13 20 13 Drc Commenced Spuding 20_13 Finished Drilling 0 bild WEST **Driller's Name Driller's Name Driller's Name** 412 Tool Dresser's Name **Tool Dresser's Name Tool Dresser's Name** TOS **Contractor's Name** 20 1 15 (Township) (Range) (Section) 785 Distance from line, ft. ι 7 Distance from line, ft. 8 sacks Shis

CASING AND TUBING RECORD



CASING AND TUBING MEASUREMENTS

				-	
Feet	ln.	Feet	ln.	Feet	ln.
804.	90	Seat	'n	PPIK	
				0.0	
836.	40	Bat	Ŧ	C	
867.	90	FLoc	F	<u> </u>	
				7	10
				·d ·	15
				-	
and star in second					
10					
					-
		in the state of the state of the			
			17772-01-		

-1-

Thickness of Strata	Formation	Total Depth	Remarks
0-21	Soil- clay	121	
2	Lime	23	
В	Shal-e	31	
4	Lime	35	
135	Shale	170	3
3	Lime	178	
8	Shale	186	-
14	Lime	200	-
8	Shale	208	-
7	Lime	215	-
6	Shall e	221	-
39	Lime	260	-
4	Shalf	264	-
19	Lime	283	-
72	Shall	355	-
22	Lime	377	- <u> </u>
17	5hall	394	-
7	Lin-e	401	1
. 15	Shall e	416	
9	Seind	425	no Dil
20	Lime	445	
3	Shale	445	
2	Lime	450	
D	Shal-R	460	
25	Lime	485	
ω	Shale	491	
25	Lime	516	

1007

-3-

Thickness of	Formation	516 Total	
Strata		Depth 520	Remarks
<u> </u>	Lime	524	
<u> </u>		524	
4	Shale		
5	Lime	533	- Hertha
173	Shale	706	_
8	Lime	714	_
6	Shale	720	_
5	Lime	725	-
5	shale	730	_
7	Lime	737	_
14	Shal e	751	
5	Lime	756	_
58	Shale	764	
4	sendy Lime	772	- odor - slight show
5	Lime	777	
14	Shal-e	796	_
2	Lime	798	_
2	shale	800	_
/	Lime	801	_
5	shal e	806	_
3	Sand	809	- 6roken - 10%0
5	Sanel	814	- mostly solid- poor saturation
/	Sindy Lime	515	- no Oil
6	Savel	821	- mostly solid - ok shew
79	sandy shale	900	- TD
			=
	-4-		-5
			چ

	OII Well Services, LLC	REMIT Consolidated Oil We Dept. 9 P.O. Box Houston, TX 7	ll Services, LLC 70 4346	Chan 620/431-9210 • 1-	AIN OFFICE P.O. Box 884 ute, KS 66720 800/467-8676 620/431-0012
INVOICE				Invoice #	264812
		Terms: 0/0/30,n/3	0	=========== P	== == ===== age 1
4595 H P.O. H WELLSV	ISTA ENERGY INC K-33 HIGHWAY BOX 128 VILLE KS 66092 883-4057		JIM BELL A-10 44959 SE 11-15-20 12-16-2013 KS		
Part Number 1124 1118B 1111 1110A 4402	50/50 PC PREMIUM SODIUM (KOL SEAL	tion DZ CEMENT MIX GEL / BENTONITE CHLORIDE (GRANULA L (50# BAG) RUBBER PLUG	121.00 304.00 234.00	.3900 .4600	Total 1391.50 66.88 91.26 278.30 29.50
369 80 BE 495 CEMEN 495 EQUIE 495 CASIN	ription 3L VACUUM TRUCK (CH NT PUMP PMENT MILEAGE (ONE NG FOOTAGE BULK DELIVERY		Hours 2.00 1.00 25.00 867.00 1.00	4.20 .00	Total 180.00 1085.00 105.00 .00 368.00

=========	=======================================		========	===========	===========	========	================
Parts:	1857.44	Freight:	.00	Tax:	132.81	AR	3728.25
Labor:	.00	Misc:	.00	Total:	3728.25		
Sublt:	.00	Supplies:	.00	Change:	.00		
==========	==========	================================	========		===========	=======	

Signed						Date		
BARTLESVILLE, OK	EL DORADO, KS	EUREKA, KS	PONCA CITY, OK	OAKLEY, KS	OTTAWA, KS	THAYER, KS	GILLETTE, WY	CUSHING, OK
918/338-0808	316/322-7022	620/583-7664	580/762-2303	785/672-8822	785/242-4044	620/839-5269	307/686-4914	918/225-2650

264812

TICKET NUMBER 44959 LOCATION OFfame KS

FOREMAN Fred Made

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

CONSOLIDATED

Gil Well Services, LLC

FIELD TICKET & TREATMENT REPORT

DATE CUSTOMER # WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	1
12-16-13 3244 Jim Bell # A-10	SE \$1	15	20	06	-
CUSTOMER	the second s	States Street	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	- 6	i
Altavista Energy Inc	TRUCK #	DRIVER	TRUCK #	DRIVER	İ
MALEING ADDITESS	712	Framad			1
CITY P-0- Roy 128 STATE ZIP CODE	495	Harber			1
	369	Dermas			1
Wellsville KS 66092	555	Max Cac			l
	DEPTH 9001	CASING SIZE & W	EIGHT 278	EUF	1
CASING DEPTH 8677 DRILL PIPE Joffle m JUBIN			OTHER		Ì
SLURRY WEIGHT SLURRY VOL WATE	R gal/sk	CEMENT LEFT in	CASING 31 H	Plug	
	SI	RATE 5BPM		0.	
REMARKS: Hold avew safe to meeting. E	stablish pun	no rate. 1	Mixx Pur	no 100#	
Gel Flush. Mix + Pump 121 sks	50/50 Por M	i'v Cenew	2% Cul.	5%	1
Salt 5th Kol Seal /s/1. Coment	to Surface.	Flush all	maxin	<	c
clean. Displace 2/2" Rubber	plug to b.	affle in	casing.		6
Pressure to 800 # PSI. Rela	se pressure	to set	Float V	alve.	5
Shut in casing,	/				100
<u> </u>					1

TOS Drilling- Wesley Fuel Madre

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PROD	ист	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	425		108500
5406	, 25 mi	MILEAGE	495		10,500
5402	867	Easing Footage			NIC
5407	Minimum	Tou Miles	558		3689
55020	Zhrs	80 BBL Vac Truck	369		18000
1124	121 5/45	50/50 Por Mix Coment			/39/50
1118B	- 30 4 [#]	Premione Gel			- 66-88
1111	234#	Grandlated Salt			9,26
1110 A	605	Kolsal			27830
4402		22" Rubber Plug			2950
		· · · · · · · · · · · · · · · · · · ·		* 	
	·				· · · · · · · · · · · ·
-					
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				MMGIGA	
win 3737		, , , , , , , , , , , , , , , , , , ,	7.15%	SALES TAX	132 51
		Λ		TOTAL	372825
UTHORIZTION_	Brzan nel	LTITLE		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.