



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1193738  
OIL & GAS CONSERVATION DIVISION

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
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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: \_\_\_\_\_

1193738

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

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

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
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> 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 <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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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 <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Douglas County, KS  
Well: Jim Bell A-17  
Lease Owner: Altavista

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

Commenced Spudding:  
01/30/2014

WELL LOG

Thickness of Strata	Formation	Total Depth
0-34	soil/clay	34
2	lime	36
13	shale	49
5	lime	54
131	shale	185
6	lime	191
10	shale	201
14	lime	215
8	shale	223
9	lime	232
7	shale	239
56	lime	295
19	sandy shale	314
55	shale	369
24	lime	393
18	shale	411
7	lime	418
16	shale	434
8	sand	442
18	lime	460
16	shale	476
25	lime	501
6	shale	807
24	lime	531
4	shale	535
4	lime	539
4	shale	543
5	lime	548
179	shale	727
7	lime	734
4	shale	738
4	lime	742
8	shale	750
10	lime	760
11	shale	771
3	lime	774
7	shale	781
4	sandy lime	785
3	shale	788
3	lime	791



# 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 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 -  $RPM \times d$  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-17

Farm Jim Bell

KS Douglas  
(State) (County)

36 14 20  
(Section) (Township) (Range)

For Altavista Energy inc  
(Well Owner)

## Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

Sim Bell Farm: Douglas County  
KS State; Well No. A-17

Elevation 1056

Commenced Spuding Jan 30 2014

Finished Drilling Jan 31 2014

Driller's Name Wesley DeHara

Driller's Name \_\_\_\_\_

Driller's Name \_\_\_\_\_

Tool Dresser's Name Ryan Ward

Tool Dresser's Name Stephen Scott

Tool Dresser's Name \_\_\_\_\_

Contractor's Name TOS

36 14 20

(Section) (Township) (Range)

Distance from S line, 445 ft.

Distance from E line, 515 ft.

8 sacks

8 hrs

**CASING AND TUBING RECORD**

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_

8" Set \_\_\_\_\_ 8" Pulled \_\_\_\_\_

7 1/2" Set 44 \_\_\_\_\_ 6 1/4" Pulled \_\_\_\_\_

4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_

2" Set \_\_\_\_\_ 2" Pulled \_\_\_\_\_

**CASING AND TUBING MEASUREMENTS**

Feet	In.	Feet	In.	Feet	In.
830.	95	Seat nipple			
863		Baffle			
894.15		Flint			
				2 7/8	

Thickness of Strata	Formation	Total Depth	Remarks
0-34	soil - clay	34	
2	Lime	36	
13	Shale	49	
5	Lime	54	
131	shale	185	
6	Lime	191	
10	shale	201	
14	Lime	215	
8	shale	223	
9	Lime	232	
7	shale	239	
56	Lime	295	shells
19	sandy shale	314	some sand - no oil
55	shale	369	
24	Lime	393	
18	shale	411	
7	Lime	418	
16	shale	434	
8	sand	442	no oil
18	Lime	460	
16	shale	476	
25	Lime	501	
6	shale	507	
24	Lime	531	
4	shale	535	
4	Lime	539	
4	shale	543	

543

Thickness of Strata	Formation	Total Depth	Remarks
5	Lime	548	Heathy
179	Shale	727	
7	Lime	734	
4	Shale	738	
4	Lime	742	
8	Shale	750	
10	Lime	760	
11	Shale	771	
3	Lime	774	
7	Shale	781	
4	sandy Lime	785	
3	Shale	788	
3	Lime	791	
5	Shale	796	
1	Lime	797	
21	Shale	818	redbed
2	Lime	820	
2	Shale	822	
2	Lime	824	
4	Shale	828	
3	sandy shale	831	
1	Sand	832	no Oil
8	Sand	840	broken - 75% Oil
2	Sand	842	no Oil
18	sandy shale	860	
60	Shale	920	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 # 265800

Invoice Date: 01/31/2014 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

J. BELL A-17  
42541  
SW 36-14-20  
01-31-2014  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	134.00	11.5000	1541.00
1118B	PREMIUM GEL / BENTONITE	425.00	.2200	93.50
1111	SODIUM CHLORIDE (GRANULA	259.00	.3900	101.01
1110A	KOL SEAL (50# BAG)	670.00	.4600	308.20
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50

  

Description	Hours	Unit Price	Total
369 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
503 MIN. BULK DELIVERY	1.00	368.00	368.00
666 CEMENT PUMP	1.00	1085.00	1085.00
666 EQUIPMENT MILEAGE (ONE WAY)	.00	4.20	.00
666 CASING FOOTAGE	894.00	.00	.00

Parts:	2073.21	Freight:	.00	Tax:	148.24	AR	3854.45
Labor:	.00	Misc:	.00	Total:	3854.45		
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

265800

TICKET NUMBER 42541

LOCATION Ottawa, 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
11/31/14	3244	J. Bell # A-17	Sw 36	14	20	DG
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Altavista Energy			729	Casey Ken	✓	Safety Meeting
MAILING ADDRESS			6666	Gar Moo	✓	
PO Box 128			503	Fred Mad	✓	
CITY	STATE	ZIP CODE	369	Jas Ric	✓	
Wellsville	KS	66092				

JOB TYPE Logging HOLE SIZE 5 5/8" HOLE DEPTH 920' CASING SIZE & WEIGHT 2 7/8" EOE  
 CASING DEPTH 894' DRILL PIPE \_\_\_\_\_ TUBING baffle - 863' OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 31'  
 DISPLACEMENT 5.00 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 bpm

REMARKS: held safety meeting, established circulation, mixed + pumped 200 # Premium Gel followed by 10 bbls fresh water, mixed + pumped 134 sks 50/50 Pozmix cement w/ 2% gel, 5% salt, + 5 # Kolseal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to baffle w/ 5 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

*(Handwritten signature)*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00 ✓
5406	on lease	MILEAGE		
5402	894'	casing footage		
5407	minimum	for mileage		368.00 ✓
5502C	2 hrs	80 Uac		180.00 ✓
1124	134 sks	50/50 Pozmix cement		1541.00 ✓
1118B	425 #	Premium Gel		93.50 ✓
1111	259 #	Salt		101.01 ✓
1110A	670 #	Kolseal		308.20 ✓
4402	1	2 1/2" rubber plug		29.50 ✓
			7.15%	SALES TAX
				ESTIMATED TOTAL
				148.24 ✓
				3854.45 ✓

**completed**

AUTHORIZATION Bryan Miller 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.