

С	onfiden	tiality Reque	ested:
	Yes	No	

Kansas Corporation Commission Oil & Gas Conservation Division

1209396

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:	SecTwpS. R 🔲 East 🗌 West		
Address 2:	Feet from North / South Line of Section		
City: State: Zip:+	Feet from _ East / _ West Line of Section		
Contact Person:	Footages Calculated from Nearest Outside Section Corner:		
Phone: ()	□NE □NW □SE □SW		
CONTRACTOR: License #	GPS Location: Lat:, Long:		
Name:	(e.g. xx.xxxxxx) (e.gxxx.xxxxxx)		
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84		
Purchaser:	County:		
Designate Type of Completion:	Lease Name: Well #:		
New Well Re-Entry Workover	Field Name:		
☐ Oil ☐ WSW ☐ SHOW ☐ 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:			
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Plug Back Conv. to GSW Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)		
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name:		
GSW Permit #:	Lease Name:		
Spud Date or Date Reached TD Completion Date or 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.

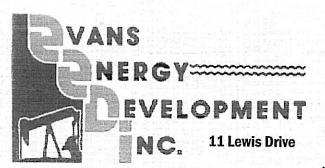
Submitted Electronically

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



Operator Name:			L	ease Name: _			Well #:	
Sec Twp	S. R	East We	est C	County:				
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres	sures, whether sh	ut-in pressur	e reached stati	c level, hydrosta	tic pressures, bott		rval tested, time tool erature, fluid recovery,
Final Radioactivity Lo files must be submitted					ogs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taker (Attach Additional		Yes [No	L	_	on (Top), Depth an		Sample
Samples Sent to Geo	logical Survey	Yes	No	Nam	e		Тор	Datum
			No No					
List All E. Logs Run:								
		(CASING REC	ORD Ne	ew Used			
		· ·		ıctor, surface, inte	ermediate, producti	1		I
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
		ADD	ITIONAL CEN	MENTING / SQL	JEEZE RECORD			
Purpose:	Depth Top Bottom	Type of Cem	ent #	Sacks Used	Type and Percent Additives			
Perforate Protect Casing	100 20111111							
Plug Back TD Plug Off Zone								
1 lag on zono								
Did you perform a hydrau	ulic fracturing treatment	on this well?			Yes	No (If No, ski	o questions 2 ar	nd 3)
Does the volume of the to		•				_ ` ` '	p question 3)	
Was the hydraulic fractur	ing treatment information	on submitted to the c	hemical disclo	sure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)
Shots Per Foot PERFORATION RECORD - Bridge Plugs Set/ Specify Footage of Each Interval Perforated					d Depth			
	, ,	<u> </u>						·
TUBING RECORD:	Size:	Set At:	Pa	acker At:	Liner Run:			
						Yes No		
Date of First, Resumed	Production, SWD or Ef		cing Method: owing	Pumping	Gas Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. G	as Mcf	Wate	er Bi	ols. G	as-Oil Ratio	Gravity
DIODOCITI	ON OF CAS:		N 4 - T - 1		TION:		PPODUOTIO	ON INTERVAL.
Vented Solo	ON OF GAS: Used on Lease	Open Ho		IOD OF COMPLE \Box		nmingled	PRODUCTION	ON INTERVAL:
	bmit ACO-18.)	Other (St	necify)	(Submit		mit ACO-4)		



Oil & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Paola, KS 66071

Altavista Energy, Inc. R. Salava North #1 API # 15-031-22,725

August 23 - August 25, 2010

Thickness of Strata	<u>Formation</u>	<u>Total</u>
17	soil & clay	17
5	lime	22
8	shale	30
5	lime	35
178	shale	213
46	lime	259
35	shale	294
53	lime	347
76	shale	423
5	lime	428
6	shale	434
5	lime	439
6	shale	445
8	lime	453
11.	shale	464
18	lime	482
11	shale	493
2	lime	495
41 *	shale	536
2	lime	538
10	shale	548
45	lime	593
9	shale	602
23	lime	625
3	shale	628
5	lime	633
4	shale	637
14	lime	651 base of the Kansas City
164	shale	815
3	lime	. 818
2	shale	820
4	lime	824
7	shale	831
16	lime	847
15	shale	862
8	lime	870
6	shale	876
14	lime	890
13	shale	903
7	lime	910
		310

R. Salava North #1		Page 2
11	shale	921
6	lime	927
39	shale	966
9	lime	975
2	shale	977
14	lime	991
24	shale	1015
	lime	1016
5	shale	1021
2	broken sand	1023
7	silty shale	1030
12	shale	1042 TD

Drilled a 9 7/8" hole to 41.2' Drilled a 5 5/8" hole to 1042.

Cored from 1022'-1042'

Set 41.2' of 7" surface casing with 10 sacks gel cemented by Consolidated Oil Services.

This well was plugged with 10 sacks of cement at 1042', 10 sacks at 640', and filled from 250' to the top.

Core Times

	Minutes	Second
1022		28
1023		37
1024		39
1025		46
1026		45
1027		45
1028		45
1029		59
1030		45
1031	1	10
1032		49
1033		48
1034		52
1035		55
1036		52
1037		50
1038		55
1039		44
1040		49
1041		56