

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1228093

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: _____



1228093

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 (Attach Additional Sheets)	☐ 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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled (Submit ACO-5) ☐ Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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DRILLERS LOG

API NO: 15 - 031 - 23995 - 00 - 00

OPERATOR: ALTAVISTA ENERGY INC

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

WELL #: 25 LEASE NAME: MARJORIE CROTTS

FOOTAGE LOCATION: 3465 FEET FROM (N) (S) LINE 3135 FEET FROM (E) (W) LINE

CONTRACTOR: FINNEY DRILLING COMPANY

SPUD DATE: 9/9/2014

DATE COMPLETED: 9/11/2014

GEOLOGIST: DOUG EVANS

TOTAL DEPTH: 1123 P.B.T.D.

OIL PURCHASER: COFFEYVILLE RESOURCES CRUDE TRANSPORTATION

CASING RECORD

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

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	19	50	OWC	58	SERVICE COMPANY
PRODUCTION:	5.8750	2.8750 8rd	6.5	1120	OWC	138	SERVICE COMPANY

WELL LOG

CORES: #1 - 1025 - 1040

RECOVERED:

ACTUAL CORING TIME:

RAN: 1 - FLOAT SHOE

1 - RAFFLE

3 - CENTRALIZERS

1 - SEATING NIPPLE

1 - COLLAR

1 - CLAMP

FORMATION	TOP	BOTTOM
TOP SOIL	0	3
CLAY	3	29
SAND GRAVEL	29	46
SHALE	46	231
LIME	231	253
SHALE	253	257
LIME	257	280
SHALE	280	368
LIME	368	381
SHALE	381	385
LIME	385	393
SHALE	393	429
LIME	429	491
SHALE	491	500
LIME	500	505
SHALE	505	529
SHALE & LIME	529	546
KC LIME	546	606
SHALE	606	611
KC LIME	611	635
SHALE	635	639
KC LIME	639	662
SHALE	662	803
LIME	803	804
SAND & SHALE	804	817
LIME	817	827
SHALE	827	837
LIME	837	847
SAND & SHALE	847	904
LIME	904	910
SAND & SHALE	910	930
LIME	930	934
SAND & SHALE	934	938
LIME	938	939
SAND & SHALE	939	950
LIME	950	953
SAND & SHALE	953	973
LIME	973	978
SAND & SHALE	978	984
LIME	984	989
SAND & SHALE	989	1021.5

[illegible]



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
~~FINV~~
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 # 270990

Invoice Date: 09/11/2014 Terms: 0/30/10,n/30

Page 1

ALTAVISTA ENERGY INC
4595 K-33 HIGHWAY
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

M. CROTTS #25
48160
NW14-22-16
9-9-14
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
1110A	KOL SEAL (50# BAG)	200.00		.4600	92.00
1111	SODIUM CHLORIDE (GRANULA	78.00		.3900	30.42

Sublet Performed	Description	Total
9996-120	CEMENT MATERIAL DISCOUNT	-179.15

	Description	Hours	Unit	Price	Total
369	80 BBL VACUUM TRUCK (CEMENT)	1.50		100.00	150.00
445	CEMENT PUMP (SURFACE)	1.00		870.00	870.00
445	EQUIPMENT MILEAGE (ONE WAY)	1.00		.00	.00
445	CASING FOOTAGE	51.00		.00	.00
558	TON MILEAGE DELIVERY	83.70		1.41	118.02

Amount Due 1771.91 if paid after 09/21/2014

Parts: 597.16 Freight: .00 Tax: 25.71 AR 1581.74
Labor: .00 Misc: .00 Total: 1581.74
Sublt: -179.15 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

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

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 48160
LOCATION Oxtawa KS
FOREMAN Fred Maden

270990

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9.9.14	3244	M Crofts # 25	NW 14	22	16	CF
CUSTOMER <u>Alta Vista Energy Inc</u>						
MAILING ADDRESS <u>P.O. Box 128</u>						
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66092</u>				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			712	Fred Mad		
			445	Bie Man		
			369	Dusweb		
			558	BroBiv		

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 51' CASING SIZE & WEIGHT 7"
CASING DEPTH 51' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 10' P
DISPLACEMENT 1.75 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Hold crew safety meeting. Establish circulation thru 7"
Casing. Mix & Pump 40 SKS 50/50 Premix Cement 22s Gal
5% Salt 5" Kol Seal/sk. Cement to Surface. Displace
7" Casing clean w/ 1.75 BBL water. Shut in Casing.

Finney Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE <u>Surface Cement 445</u>		870 ⁰⁰
5406	-	MILEAGE		N/C
5402	51'	Casing footage		N/C
5407A	83 ²⁰	Ton Miles	558	118 ⁰²
5502C	1 1/2 hr	80 BBL Vac Truck	369	150 ⁰⁰
1124	40 SKS	50/50 Premix Cement	460 ⁰⁰	✓
118B	67 ²⁴	Premium Gel	14 ²⁴	✓
1110A	200 ⁴	Kol Seal	92 ⁰⁰	✓
111	78 ⁴	Granulated Salt	30 ⁴³	✓
		Material	597 ¹⁶	
		Less 30%	-179 ¹⁵	✓
		Total		418 ⁰⁵
			1771.91	
			6.15%	SALES TAX
				2521
				ESTIMATED
				TOTAL
				1581 ²⁴

Havin 3737

OK'd J Green

IRIZATION No Co Rep on Site TITLE _____ DATE _____

I warrant that the payment terms, unless specifically amended in writing on the front of the form or in the customer's 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 # 271102

Invoice Date: 09/17/2014 Terms: 0/30/10,n/30

Page 1

ALTAVISTA ENERGY INC
4595 K-33 HIGHWAY
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

M. CROTTS #25
48180
NW14-22-16
09/11/2014
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	145.00	11.5000	1667.50
1118B	PREMIUM GEL / BENTONITE	344.00	.2200	75.68
1111	SODIUM CHLORIDE (GRANULA	280.00	.3900	109.20
1110A	KOL SEAL (50# BAG)	725.00	.4600	333.50
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50

Sublet Performed	Description	Total
9996-120	CEMENT MATERIAL DISCOUNT	-655.76

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	1119.00	.00	.00
510 TON MILEAGE DELIVERY	303.41	1.41	427.81
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	100.00	200.00

Amount Due 4253.43 if paid after 09/27/2014

Parts:	2215.38	Freight:	.00	Tax:	95.91	AR	3557.34
Labor:	.00	Misc:	.00	Total:	3557.34		
Sublt:	-655.76	Supplies:	.00	Change:	.00		

Signed _____ Date _____

271102


CONSOLIDATED
 Oil Well Services, LLC

 PO Box 884, Chanute, KS 66720
 620-431-9210 or 800-467-8676
TICKET NUMBER 48180LOCATION Ottawa KSFOREMAN Fred Madar
FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-11-14	3244	M. Crofts # 25	NW 14	22	16	CF
CUSTOMER <u>Alta Vista Energy Inc</u>						
MAILING ADDRESS <u>P.O. Box 128</u>						
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66092</u>				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			712	Fred Mad		
			495	Har Bec		
			625	Ki Det		
			510	Dus Web		

JOB TYPE <u>long string</u>	HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>1121</u>	CASING SIZE & WEIGHT <u>2 7/8 EUE</u>
CASING DEPTH <u>1119</u>	DRILL PIPE <u>Baffle in</u>	TUBING @ <u>1088</u>	OTHER
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>31' x Plug</u>
DISPLACEMENT <u>6.32 BL</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>5 BPM</u>

REMARKS: Hold crew safety meeting. Establish circulation. Mix Pump 100% Gel Flush. Mix & Pump 145 SKS 50/50 Poz Mix Cement 2% Gel 5% Salt 5# Kal Seal/sk. Cement to Surface. Flush pump & lines clean. Displace 2 1/2" Rubber plug to Baffle in casing. Pressure to 800# PSI. Release pressure to set float valve. Shut in casing.

Finney Drilling.

Fred Madar

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085 ⁰⁰
5406	45 mi	MILEAGE	495	189 ⁰⁰
5402	1119	Casing Footage		NIC
5402A	303.41	Ten Miles	510	427 ⁸¹
5502C	2 hrs	80 BBL Vac Truck	625	200 ⁰⁰
1124	145 SKS	50/50 Poz Mix Cement	1667 ⁵⁰	
1118B	344#	Premium Gel	75 ⁶⁸	
1111	280#	Granulated Salt	109 ²⁰	
1110A	725#	Kal Seal	333 ⁵⁰	
		Material Less 30%	2185 ⁸⁸	
		Total	- 655 ⁷⁶	
4402	1	2 1/2" Rubber Plug		1530 ¹²
				29 ⁵⁰
COMPLETED			4253.44	
		6.15%	SALES TAX	75 ²¹
			ESTIMATED TOTAL	3557 ³⁴

Ravin 3737

OK'd J. Green

AUTHORIZATION No Co Rep on Site

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.