



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1240554  
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: \_\_\_\_\_



1240554

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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Miami County, KS  
 Well: East Goetz A-37  
 Lease Owner: Altavista

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

Commenced Spudding:  
 9/8/2014

WELL LOG

Thickness of Strata	Formation	Total Depth
0 - 5	Soil - Clay	5
7	Lime	12
40	Shale	52
14	Lime	66
11	Shale	77
28	Lime	105
7	Shale	112
19	Lime	131
5	Shale	136
3	Lime	139
4	Shale	143
5	Lime	148
29	Shale	177
16	Sand	193
21	Sandy Shale	214
40	Shale	254
6	Sand	260
28	Lime	288
8	Shale & Lime	296
16	Shale	312
10	Lime	322
4	Shale & Lime	326
8	Sand	334
38	Shale	372
9	Lime	381
10	Shale	391
3	Lime	394
14	Shale	408
8	Lime	416
18	Shale	434
15	Lime	449
4	Shale	453
20	Sand	473
86	Shale	559
4	Sandy Shale & Lime	563
2	Sand	565
1	Sand	566
14	Core	580
18	Shale	598
42	Sand	640



# 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  $BPH \times PSI \times .0004$

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-37

Farm East Goetz

KS Miami  
(State) (County)

9 18 22  
(Section) (Township) (Range)

For Altavista Energy inc  
(Well Owner)

## Town Oilfield Services, Inc.

1207 N. 1st East  
Louisburg, KS 66053  
913-710-5400

East Goetz Farm: Miami County

KS State; Well No. A-37

Elevation 871

Commenced Spuding Sept 8, 2014

Finished Drilling Sept 9, 2014

Driller's Name Wesley Dollard

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

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

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

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

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

Contractor's Name TOS

9          18          22

(Section)          (Township)          (Range)  
Distance from S line, 4125 ft.

Distance from E line, 4795 ft.

4 sacks

### CASING AND TUBING RECORD

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

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

~~7~~ 7" Set 23          6 1/4" Pulled \_\_\_\_\_

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

~~2 1/2~~ 2 1/2" Set 630.85          2" Pulled \_\_\_\_\_

600.56          Baffle  
569.55          seat nipple  
640 TD

### CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
600	56	Baffle			
636	85	Total			

Thickness of Strata	Formation	Total Depth	Remarks
0-5	soil-clay	5	
7	Lime	12	
40	shale	52	
14	Lime	66	
11	shale	77	
28	Lime	105	
7	shale	112	
19	Lime	131	
5	shale	136	
3	Lime	139	
4	shale	143	
5	Lime	148	Hertha
29	shale	177	
16	sand	193	no Oil
21	sandy shale	214	
40	shale	254	
6	sand	260	no Oil
28	shale	288	
8	shale & Lime	296	
16	shale	312	
10	Lime	322	
4	shale & Lime	326	
8	sand	334	no Oil
38	shale	372	
9	Lime	381	
10	shale	391	
3	Lime	394	

394

Thickness of Strata	Formation	Total Depth	Remarks
14	shale	408	
8	lime	416	
18	shale	434	
15	lime	449	
4	shale	453	
20	sand	473	no oil
86	shale	559	
4	sandy shale & lime	563	
2	sand	565	gray - no oil
1	sand	566	odor
14	core	580	page 6
18	shale	598	
42	sand	640	TD gas - water







**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 # 270975

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

E GOETZ A-37  
48170  
NW9-18-22  
9-9-14  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	76.00	11.5000	874.00
1118B	PREMIUM GEL / BENTONITE	228.00	.2200	50.16
1111	SODIUM CHLORIDE (GRANULA	147.00	.3900	57.33
1110A	KOL SEAL (50# BAG)	380.00	.4600	174.80
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50
Sublet Performed Description				Total
9996-120	CEMENT MATERIAL DISCOUNT			-346.89
	Description	Hours	Unit Price	Total
368	CEMENT PUMP	1.00	1085.00	1085.00
368	EQUIPMENT MILEAGE (ONE WAY)	1.00	.00	.00
368	CASING FOOTAGE	630.00	.00	.00
370	80 BBL VACUUM TRUCK (CEMENT)	1.50	100.00	150.00
547	MIN. BULK DELIVERY	1.00	368.00	368.00

Amount Due 2879.51 if paid after 09/21/2014

Parts:	1185.79	Freight:	.00	Tax:	64.18	AR	2506.08
Labor:	.00	Misc:	.00	Total:	2506.08		
Sublt:	-346.89	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

270975

TICKET NUMBER 48170  
LOCATION Ottawa  
FOREMAN Alan Mader

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
9-9-14	3244	E. Goetz A.37	NW 9	18	22	MI
CUSTOMER Alta Vista Energy			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 128			730	Ala Mader	safety	Mader
CITY Wellsville			368	Ala Mader		
STATE KS			370	Mik Fox		
ZIP CODE 66092			548	Dan Whig		

JOB TYPE long string HOLE SIZE 5 5/8 HOLE DEPTH 670 CASING SIZE & WEIGHT 2 7/8  
 CASING DEPTH 630 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER 600  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 3 1/2 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Held meetings. Established rate. Mixed & pumped 100# gel followed by 76 sk 50150 cement plus 220 gel, 5% salt, 5# kol seal per sack. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 PST. Set float.

TDS, Wes & Chad

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00 ✓
5406	—	MILEAGE	368	— ✓
5402	630	casing footage	368	— ✓
5407	mi	ton miles	548	368.00 ✓
5502 L	1 1/2	80 vgc	370	150.00 ✓
1124	76	50150 cement	874.00	874.00 ✓
118B	228#	gel	50.16	50.16 ✓
1111	147#	salt	57.33	57.33 ✓
110A	380#	kol seal	174.80	174.80 ✓
		material sub	1156.29	
		less 30% -	346.89	
		material total		809.40 ✓
4402	1	2 1/2 plug		29.50 ✓
			2879.50	
			SALES TAX	64.18
			ESTIMATED TOTAL	2506.08 ✓

**completed**

AUTHORIZATION Bryan Mader 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.