

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1251956

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
Address 2:	Feet from
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.xxxxxxx)
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:	Producing Formation: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No 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 SWD Plug Back Conv. to GSW Conv. to Producer Commingled Permit #: Dual Completion Permit #: SWD Permit #:	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:
☐ ENHR Permit #: ☐ GSW Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	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:

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		
Final Radioactivity Lo files must be submitted					gs must be ema	iled to kcc-well-log	gs@kcc.ks.go	. Digital electronic log
Drill Stem Tests Taker (Attach Additional		Yes	No	L		n (Top), Depth an		Sample
Samples Sent to Geo	logical Survey	Yes	No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		Yes Yes	No No					
List All E. Logs Run:								
		(CASING REC	ORD Ne	w Used			
		· ·		ıctor, surface, inte	ermediate, producti		T	
Purpose of String	Size Hole Drilled	Size Casin 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 Pe	ercent 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		•				_	o question 3)	(" 100 ")
Was the hydraulic fractur	ing treatment information	on submitted to the c	hemical disclo	sure registry?	Yes	No (If No, fill o	out Page Three	of the ACO-1)
Shots Per Foot		ION RECORD - Bri Footage of Each Int				cture, Shot, Cement		d Depth
	, ,				,		,	
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	ther <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls. G	as Mcf	Wate	er Bl	ols. G	ias-Oil Ratio	Gravity
DIODOCITI	ON OF CAS:		, 4 CT - 1		TION:		DRODUCTIO	AN INTEDVAL.
Vented Solo	ON OF GAS: Used on Lease	Open Ho		IOD OF COMPLE \Box		nmingled	PHODUCIIC	ON INTERVAL:
	bmit ACO-18.)	Other (S	necify)	(Submit		mit ACO-4)		

					J						
API NO: 15 - 031	- 24112 -	00 - 00					S. 11	T. 22	R. 16		
OPERATOR: ALTAVIS	TA ENERG	SY INC	- -						SE NE	<u>E.</u>	W.
ADDRESS: 4595 K-3	3 HWY, P.C	D. BOX 128, WELLSVII	LE, KS 66	092				COUNTY:			
WELL #: AI - 2	- .:	LEASE NAME:	YOUNG					DF:		KB:	
FOOTAGE LOCATION:	875	FEET FROM	(N)	<u>(s)</u>	LINE	4155	FEET	FROM	(E)	(W)	LINE
CONTRACTOR:	FINNEY D	RILLING COMPANY		•		GEO	LOGIST:	DOUG EV	ANS		
SPUD DATE:	4/7/	2015				TOTA	L DEPTH:			P.B.T.D.	
DATE COMPLETED:	4/9/:	2015				OIL PUR	CHASER:	COEEEXAUL	E DECOUR		RANSPORTATION
		C <i>A</i>	ASING	RECOF	RD			CONTENTE	E RESOURL	ES CRODE T	RANSPORTATION
REPORT OF ALL ST	RINGS - SU	RFACE, INTERMEDIA	TE, PRODI	UCTION, E	TC.	•					
PURPOSE OF STRING SURFACE:	SIZE HOLE DRILLED	SIZE CASING SET (in O.D.)	WEIGHT LBS/FT	SETTING		TYPE CEMENT	SACKS	TYPE A	ND % ADD	ITIVES	1
PRODUCTION:	12.2500 5.8750	7	19	43.		OWC	51	SERVICE C	OMPANY		1
	3.0730	2.8750	6.5	1098	3.40	OWC		SERVICE C			ł
			VELL L	.OG		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					I
	#1 - 1019 11 ft	- 1031					1 - FLOAT 1 - BAFFLE				

FORMATION	TOF	ВОТТОІ
TOP SOIL	0	3
CLAY	3	23
GRAVEL	23	30
LIME	30	36
SHALE	36	38
LIME	38	39
SHALE	39	232
LIME	232	252
SAND & SHALE	252	257
LIME	257	276
SHALE	276	365
LIME	365	379
SHALE	379	435
LIME	435	493
SHALE	493	501
LIME	501	502
RED BED	502	508
SAND & SHALE	508	543
LIME	543	545
SHALE KC LIME	545	548
SHALE	548	601
KC LIME	601	607
SHALE	607	632
KC LIME	632	636
SHALE	636	652
LIME	652	653
SHALE	653	655
LIME	655	797
	797	801
SAND & SHALE LIME	801	815
SHALE	815	827
	827	829
LIME SAND A SHARE	829	843
SAND & SHALE LIMF	843	899
	899	906
SHALE	906	907
	907	908
SAND & SHALE	908	925
IME	925	929
SAND & SHALE	929	946
IME	946	949

FORMATION	TOP	BOTTON
SAND & SHALE	949	970
LIME	970	973
SAND & SHALE	973	1017
CAP LIME	1017	1018
SHALE	1018	1020
CAP LIME OIL	1020	1020.5
OIL SAND	1020.5	1027
SAND & SHALE OIL SHALE	1027	1028
	1028	1086
LIME	1086	1090
SAND & SHALE	1090	1112 T.D.
	1	
220 200		
	 	
Part Control		
	+	

1 - BAFFLE 3 - CENTRALIZERS 1 - CLAMP



REMIT TO

MAIN OFFICE

P.O.Box884 Chanute,KS 66720 620/431-9210,1-800/467-8676 Fax 620/431-0012

Consolidated Oil Well Services,LLC Dept:970 P.O.Box 4346 Houston,TX 77210-4346

Invoice# 803936

Invoice Date:

04/09/15

Terms:

Net 30

Page

1

ALTAVISTA ENERGY INC

4595 K-33 HWY, PO BOX 128 WELLSVILLE KS 66092

USA

7858834057

YOUNG AI-2

Part No	Description Description	Quantity	Unit Price	Discount(%)	Total
5401S	Cement Pump Truck - Surface	1.000	870.0000	10.000	783.00
5406	Mileage Charge	1.000	0.0000	0.000	0.00
5402	Casing Footage	433.400	0.0000	0.000	0.00
5407A	Ton Mileage Delivery Charge	83.700	1.4100	10.000	106.22
5502C	80 Vacuum Truck Cement	1.500	100.0000	10.000	135.00
1118B	Premium Gel / Bentonite	76.000	0.2200	30.000	11.70
1111	Sodium Chloride (Granulated Salt)	91.000	0.3900	30.000	24.84
1110A	Kol Seal (50# BAG)	225.000	0.4600	30.000	72.45
1124	Poz Cement Mix	45.000	11.5000	30.000	362.25
				Subtotal	1.811.23

SubTotal After Discount 1,495.47

Amount Due 1,852.63 If paid after 05/09/15

Tax:

28.98

315.76

Total:

Discounted Amount

1,524.44



50930 **TICKET NUMBER** LOCATION Ottawa KS FOREMAN Fred Mader

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

-			E O TOTAT		ODT		
PO Box 884, C	hanute, KS 66720	FIELD TICKET	200 - 2 C - 10 C		UKI		
620-431-9210	or 800-467-8676		CEMENT				
DATE	CUSTOMER#	WELL NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
4-7-15	2305 /000	g# AI.2		SW H	ವಿಷ	16	CF
CUSTOMER		J			30世間提出第		行政等。其
Alta	ista Energy			TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	iss //		1 L	712	Fre Mad	P	
P.D.	Box 128			495	Har Bec		
CITY	STATE	ZIP CODE	1 [675	Kei Det		
Wellsvi	de iks	66092	1 [804	Gar Mas		
JOB TYPE S			HOLE DEPTH		CASING SIZE & W	EIGHT >"	5*550
CASING DEPTH		PE	TUBING			OTHER	
SLURRY WEIGH		VOL	WATER gal/sk		CEMENT LEFT In	CASING 10'+	
DISPLACEMENT	1.888L DISPLACE	EMENT PSI	MIX PSI	7. (Company of the Company of the Co	RATE SAP	n	
REMARKS: 14		etha. Esta	blish ei	Meikolusz	Klow y"	Carine.	
Mixi	2	KS 50/50					
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					**************************************		1000
Esa	new Drilling.			=======================================	ud Made		
1 1 1 1	7			75	erx F. wort		
ACCOUNT CODE	QUANITY or UNITS	DE	SCRIPTION of S	SERVICES or PRO	DDUCT	UNIT PRICE	TOTAL
54015	, 1	PUMP CHARG	E Surfa	ce (em	ent 495	87000	183
	<i>*</i>	1411 54.05				416	4

	V •				
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT		UNIT PRICE	TOTAL
54015		PUMP CHARGE Surface Cement	475	87000	183
5-406		MILEAGE		N/C	
5402	42.42	Casha footage		N/c ·	
5407 Ad	83.7	Ton Miles	804	118.02	106.22
5502Cd	1 2hr	FOBBL Vac Truck	675	12000	135.00
		Sub Total		113802	
		Less 10%		-11380	1024 22
<u> </u>					1
1124	45343	50/50 Por M. x Coment		5/7	50
1118B	76#	Premoun Gel	-194	1672	
1111	9/#	Granulated Solt		354	
1110 A	225#	Kol Seal		10350	
		Motorial		6332	817.0
		Less 30%		-79194	
		Total) FE & S-01
A 100 TO					

AUTHORIZTION

TITLE_

SALES TAX

6.53

ESTIMATED TOTAL 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.



REMIT TO

MAIN OFFICE

P.O.Box884 Chanute,KS 66720 620/431-9210,1-800/467-8676 Fax 620/431-0012

1

Consolidated Oil Well Services,LLC
Dept:970
P.O.Box 4346
Houston,TX 77210-4346

Invoice Invoice# 803961

Invoice Date: 04/10/15 Terms: Net 30 Page

ALTAVISTA ENERGY INC

4595 K-33 HWY, PO BOX 128 WELLSVILLE KS 66092

WELLSVILLE KS 66092

USA

7858834057

YOUNG AI-2

Part No	Description	Quantity	Unit Price	Discount(%)	Total
5401	Cement Pumper	1.000	1,085.0000	10.000	976.50
5406	Mileage Charge	40.000	4.2000	10.000	151.20
5402	Casing Footage	1,098.400	0.0000	0.000	0.00
5407A	Ton Mileage Delivery Charge	260.400	1.4100	10.000	330.45
5502C	80 Vacuum Truck Cement	1.500	100.0000	10.000	135.00
1124	Poz Cement Mix	140.000	11.5000	30.000	1,127.00
1118B	Premium Gel / Bentonite	335.000	0.2200	30.000	51.59
1111	Sodium Chloride (Granulated Salt)	282.000	0.3900	30.000	76.99
1110A	Kol Seal (50# BAG)	700.000	0.4600	30.000	225.40
4402	2 1/2 Rubber Plug	1.000	29.5000	0.000	29.50

Subtotal 3,915.34
Discounted Amount 811.72
SubTotal After Discount 3,103.62

Amount Due 4,047.27 If paid after 05/10/15

Total:

Tax: 92.89

3,196.52



PO Box 884, Char 620-431-9210 or		O FIE	LD HCKEI & IKE CEMI		ואכ		
	CUSTOMER#	WELL	NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
N. 8.12	3244	Young	# A I-2	Sw 11	22	16	CF
CUSTOMER		- 5			過期的		ST. III PORT
A) (+a	vista E	nergy		TRUCK#	DRIVER	TRUCK#	DRIVER
		. 0		7/2	Fre Med	-	
ρ.ο.		2. 8 STATE	ZIP CODE	495	HarBec	<i></i>	
CITY	0 786		20 50	675	Kei Det	<u> </u>	
Wellsu		KS	66092	5481	Arlmob	- 7,	() () () () () () () () () ()
JOB TYPE LON	got/ing	HOLE SIZE			CASING SIZE & W		COF
CASING DEPTH_	098.40	DRILL PIPE	Baffle in TUBING	0 1068		OTHER	
SLURRY WEIGHT_		SLURRY VOL_	WATER 9	al/sk	CEMENT LEFT In	CASING 38 7	15
DISPLACEMENT_	6.21BB	DISPLACEMEN	T PSI MIX PSI_	<u> </u>	RATE 5 BPY	<u>N</u>	
REMARKS: Hol	d Safet	y meetin	s. Establish	Circulation	C, Mix+1	Dump 100°	FGU
Flush.	Mix	+ Purns	140 SKS 50	150 Por Mix	Coment	2% Cel 3	70
Salt	5 # Kol S			Surface.	Flusho	umst lin	
2/2001	Dienl		" Rubber p				
Press		0 6007	+ PSI. Roleas	000000000	to set 7	loast Val	Je.
(1.4)			JULI JULIEUR	pressure			
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	S (1/				711	ladu	-
Fina	en Drill	·mg.		-	Tub or	- aare	
ACCOUNT	QUANITY	or UNITS	DESCRIPTIO	N of SERVICES or PRO	DDUCT	UNIT PRICE	TOTAL
CODE			PUMP CHARGE		495	108500	
5401			MILEAGE		495	16800	
5406		40 mi		J	7.73	N/C =	
5402		98.40	Casing foo	Toca		36746	
5407 A		60.4	Ion Wiles		548	3672	
5502C		12 hr	80 BBL Va		675	15000	
			2ـــــــــــــــــــــــــــــــــــــ	ub Total		17701	
				hess 10%		- 177 02	159314
1/24	14	10 SKS	50/50 Por M	2 Comes X		1/210000	
11188	.2	35#	Premium (7320	
		<u> </u>	6 ranslates	1011		10998	
1111		82 4		x Sair		322 = 0	
1110 A	/	00#	Kol Scal	1 1 1 1		322	
				laterial		2115 68	
				Less 30%		- 634 20	111.2 98
			<u> </u>	Total			148098
4402			2/2" Rubba	er Plus			2959
				<u></u>			
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	A A A MARIE	aloxani					
14	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				615%	SALES TAX	92.59
Ravin 3737	ا				——————————————————————————————————————	ESTIMATED	3196 50
	4/2	7				TOTAL	110170
AUTHORIZTION_	HV L	/	TITLE			DATE	404727