



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1257605  
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
-----------------------------------	-----------------	---

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: \_\_\_\_\_



1257605

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> _____ _____
--	---	---

Miami County, KS  
 Well: Nevius A-12  
 Lease Owner: Altavista Energy

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

Commenced Spudding:  
 5-4-2015

WELL LOG

Thickness of Strata	Formation	Total Depth
0 - 6	Soil	6
9	Lime	15
46	Shale	61
9	Lime	70
7	Sandy Lime	77
29	Lime	106
21	Shale	127
10	Lime	137
6	Shale	143
1	Lime	144
21	Shale	165
5	Lime	170
9	Shale	179
1	Lime	180
26	Shale	206
10	Lime	216
16	Shale	231
26	Lime	257
6	Shale	263
22	Lime	285
4	Shale	289
2	Lime	291
6	Shale	297
6	Lime	303
10	Shale	313
3	Sand	316
16	Shale	332
22	Sand	354
142	Shale	496
9	Lime	505
6	Shale	511
9	Lime	520
20	Shale	539
4	Lime	543
10	Shale	553
3	Lime	556
9	Shale	565
8	Lime	573
65	Shale	638
3	Shale - Black	641



# Core

		642
1	Sandy Shale	643
1		644
1		645
1		646
1		647
1		648
1		649
1	Solid Sand	650
1		651
1		652
1		653
1	Best Saturation	654
1		655
1		656
1		657
1	Sandy Shale	658
1	Sandy Shale	659

# 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 -  $\text{RPM} \times d$  over  $\text{SPM} \times R$

d -  $\text{SPM} \times R \times D$  over RPM

SPM -  $\text{RPM} \times D$  over  $R \times d$

R -  $\text{RPM} \times D$  over  $\text{SPM} \times d$

BELT LENGTH -  $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

\* Need these to figure belt length

TO FIGURE AMPS:  $\frac{\text{WATTS}}{\text{VOLTS}} = \text{AMPS}$

746 WATTS equal 1 HP

# Log Book

Well No. A-12

Farm Nevins

KS MIAMI  
(State) (County)

17 16 24  
(Section) (Township) (Range)

For DE EXP  
(Well Owner)

## Town Oilfield Services, Inc.

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



Thickness of Strata	Formation	Total Depth	Remarks
0-6	Soil	6	
9	Lime	15	
46	Shale	61	
9	Lime	70	
7	Sandy Lime	77	Water
29	Lime	106	
21	Shale	127	
10	Lime	137	
6	Shale	143	
1	Lime	144	
21	Shale	165	Red bed
5	Lime	170	
9	Shale	179	
1	Lime	180	
26	Shale	206	
10	Lime	216	
16	Shale	231	
26	Lime	257	Winterset
6	Shale	263	
22	Lime	285	Bethany Falls
4	Shale	289	
2	Lime	291	ICC
6	Shale	297	
6	Lime	303	Hertha
10	Shale	313	
3	Sand	316	Oil, Good bleed
16	Shale	332	





Thickness of Strata	Formation	Total Depth	Remarks
642	Sandy Shale	10-	Sand, Slight bleed
643			
644	Solid Sand	70%	Oil Bleed
645			
646	Best Saturation		Perf.
647			
648	Sandy Shale	NO	OIL
649			
650			
651			
652			
653			
654			
655			
656			
657			
658			
659			



**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# 804214

Invoice Date: 05/19/15 Terms: Net 30 Page 1

ALTAVISTA ENERGY INC  
4595 K-33 HWY, PO BOX 128  
WELLSVILLE KS 66092  
USA  
7858834057

NEVIUS #A-12

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	1,085.0000	30.000	759.50
CE0002	Equipment Mileage Charge - Heavy Equipment	30.000	4.2000	30.000	88.20
CE0461	Cement Pump Charge Below 12000'	713.000	0.0000	0.000	0.00
CE0711	Minimum Cement Delivery Charge	1.000	368.0000	30.000	257.60
WE0853	80 BBL Vacuum Truck (Cement Services)	2.000	100.0000	30.000	140.00
CC5840	Poz-Blend I A (50:50)	91.000	11.5000	30.000	732.55
CC5965	Bentonite	353.000	0.2200	30.000	54.36
CC5326	Sodium Chloride, Salt	191.000	0.3900	30.000	52.14
CC6077	Kolseal	455.000	0.4600	30.000	146.51
CP8176	2 7/8" Top Rubber Plug	1.000	29.5000	30.000	20.65

Subtotal 3,216.45  
Discounted Amount 964.94  
SubTotal After Discount 2,251.51

Amount Due 3,326.41 If paid after 06/18/15

Tax: 76.97  
Total: 2,328.48



**CONSOLIDATED**  
Oil Well Services, LLC

2843  
767

INVOICE # 804214

TICKET NUMBER 50957  
LOCATION Chanaw, 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
5/5/15	3244	Norris # A-12	NE 17	16	24	MI
CUSTOMER Atavista Energy			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS PO Box 128			729 Casken Safety Maching			
CITY STATE ZIP CODE Wellsville KS 66092			4167 KeiCar			
			558 Arl Med			
			675 Kei Det			

JOB TYPE Logging HOLE SIZE 5 5/8" HOLE DEPTH 720' CASING SIZE & WEIGHT 2 7/8" EUE  
CASING DEPTH 713' DRILL PIPE TUBING baffle - 682' OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 31'  
DISPLACEMENT 3.95 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 bpm

REMARKS: held safety maching, established circulation, mixed & pumped 200 # Gel, followed by 10 bbl fresh water, pressure 800 mixed & pumped 91 sks 5950 Pozmix cement w/ 2% gel, 5% salt, + 5 # Kal seal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to baffle w/ 3.95 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 C20450	1	PUMP CHARGE	1085.00	
5406 C20002	30 mi	MILEAGE	126.00	
5402 C20401	713'	casing footage		
5407 C20711	minimum	you mileage	368.00	
5502 C20853	2 hrs	80 Vac	200.00	
		trucks	1779.00	
		-30%	533.70	
		subtotal		1245.30
1124 CC5840	91 sks	50/50 Pozmix cement	1046.50	
1118 CC5965	33 #	Gel	77.60	
1111 CC5326	121 #	Salt	74.49	
1110A CC6077	55 #	Kal seal	209.30	
4402 CP8174	1	2 1/2" rubber plug	29.50	
		materials	1437.45	
		-30%	431.24	
		subtotal		1006.21
		7.65%	SALES TAX	76.98
		ESTIMATED TOTAL		2328.49

**completed**

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE 3/3/2011

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.