



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1258851
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: _____



1258851

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <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> _____	PRODUCTION INTERVAL: _____ _____
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Miami County, KS
 Well: Barkis A-10
 Lease Owner: Altavista Energy

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

Commenced Spudding:
 4-9-2015

WELL LOG

Thickness of Strata	Formation	Total Depth
0 - 6	Soil - Clay	6
13	Lime	19
15	Shale	34
7	Sand	41
2	Shale	43
13	Lime	56
67	Shale	123
22	Lime	145
13	Shale	158
10	Lime	168
12	Sandy Shale	180
20	Shale	200
3	Lime	203
40	Shale	243
10	Lime	253
15	Shale	268
25	Lime	293
8	Shale	301
21	Lime	322
3	Shale	325
2	Lime	327
6	Shale	333
8	Lime	341
31	Shale	372
1	Sandy Shale	373
1	Sand	374
19	Core #1	393
37	Sandy Shale	430
118	Shale	548
8	Lime	556
17	Shale	573
3	Lime	576
7	Shale	583
5	Lime	588
6	Shale	594
1	Lime	595
1	Shale	596
8	Lime	604
21	Shale	625
2	Lime	627

Core

Core #1		
		374
2.5	Sand & Sandy Shale	376.5
1	Lime	377.5
3.5	Gas Sand	381
4	Sand	385
5	Sand & Sandy Shale	390
3	Sandy Shale	393
Core #2		
		676
1	Sand	677
2	Sand & Shale	679
1	Laminated Sand	680
3	Solid Sand	683
13	Sandy Shale	696

Short Cuts

TANK CAPACITY

BBLs. (42 gal.) equals $D^2 \times h \times 14.4$

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-10

Farm Barkis

KS Miami
(State) (County)

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

For Altavista Energy inc
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

Barkis Farm: Miami County
 KS State; Well No. A-10
 Elevation 1086
 Commenced Spuding 4-9, 20 15
 Finished Drilling 4-13, 20 15
 Driller's Name Wesley Dollard
 Driller's Name _____
 Driller's Name _____
 Tool Dresser's Name Ryan Ward
 Tool Dresser's Name _____
 Tool Dresser's Name _____
 Contractor's Name TOS
 17 16 24

(Section) (Township) (Range)
 Distance from S line, 5115 ft.
 Distance from E line, 4785 ft.
 4 sacks 2 cores

12 hrs
 5 5/8 borehole
 2 7/8 casing

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
 8" Set _____ 8" Pulled _____
 7 1/4" Set 23 6 1/4" Pulled _____
 4" Set _____ 4" Pulled _____
 2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
673.	45	Seat nipple			
704.	90	Baffle			
736.	40	Float			
760	TD	2 7/8			

Thickness of Strata	Formation	Total Depth	Remarks
0-6	soil - clay	6	
13	Lime	19	
15	Shale	34	red bed
7	sand	41	grey - no oil
2	shale	43	
13	Lime	56	
67	Shale	123	
22	Lime	145	
13	Shale	158	
10	Lime	168	
12	sandy shale	180	
20	shale	200	
3	Lime	203	
40	Shale	243	
10	Lime	253	
15	shale	268	
25	Lime	293	
8	Shale	301	
21	Lime	322	
3	shale	325	
2	Lime	327	
6	shale	333	
8	Lime	341	Hertha
31	shale	372	
1	sandy shale	373	
1	sand	374	odor
19	core #1	393	page 8

393

Thickness of Strata	Formation	Total Depth	Remarks
37	sandy shale	430	
118	shale	548	
8	Lime	556	
17	shale	573	
3	Lime	576	
7	shale	583	
5	Lime	588	
6	shale	594	
1	Lime	595	
1	shale	596	
8	Lime	604	
21	shale	625	
2	Lime	627	
48	shale	675	
1	sand	676	solid oil - perf
20	core #2	696	page 8
7	sandy shale	703	
57	shale	760	TD

Thickness of Strata	Formation	Total Depth.	Remarks
	Core #1		
		374	
2.5	sand & sandy shale	376.5	laminated gas sand
1	Lime	377.5	
3.5	gas sand	381	brown
4	sand	385	solid oil - Heavy
5	sand & sandy shale	390	laminated - no oil
3	sandy shale	393	
	Core #2		
		676	
1	sand	677	solid oil
2	sand & shale	679	some oil - not much Perf
1	laminated sand	680	good show
3	solid sand	683	good show
13	sandy shale	696	



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

MAIN OFFICE

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

Invoice Invoice# 804013

Invoice Date: 04/17/15 Terms: Net 30 Page 1

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

BARKIS #A-10

Part No	Description	Quantity	Unit Price	Discount(%)	Total
5401	Cement Pumper	1.000	1,085.0000	30.000	759.50
5406	Mileage Charge	30.000	4.2000	30.000	88.20
5402	Casing Footage	736.000	0.0000	0.000	0.00
5407	Min. Bulk Delivery Charge	1.000	368.0000	30.000	257.60
5502C	80 Vacuum Truck Cement	1.500	100.0000	30.000	105.00
1124	Poz Cement Mix	94.000	11.5000	30.000	756.70
1118B	Premium Gel / Bentonite	258.000	0.2200	30.000	39.73
1111	Sodium Chloride (Granulated Salt)	190.000	0.3742	30.000	49.77
1110A	Kol Seal (50# BAG)	470.000	0.4600	30.000	151.34
4402	2 1/2 Rubber Plug	1.000	29.5000	30.000	20.65

Subtotal 3,183.56
 Discounted Amount 955.07
 SubTotal After Discount 2,228.49

Amount Due 3,294.83 If paid after 05/17/15

Tax: 77.89
 Total: 2,306.38



CONSOLIDATED
Oil Well Services, LLC

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

2678
Invoice # 804013 *2610*
FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 50936

LOCATION Ottawa KS

FOREMAN Fred Mader

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-13-15	3244	Barkis # A-10	NW 17	16	24	Mi
CUSTOMER <u>Attavista Energy</u>			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS <u>P.O. Box 128</u>			712 / Fred Mader			
CITY <u>Wellsville</u>			495 / Har Bee			
STATE <u>KS</u>			675 / Kid Det			
ZIP CODE <u>66092</u>			548 / Arl McD			

JOB TYPE hangstring HOLE SIZE 5 7/8 HOLE DEPTH 760' CASING SIZE & WEIGHT _____
 CASING DEPTH 736 DRILL PIPE Baffle tubing @ 704 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 32' x Plug
 DISPLACEMENT 4.09 B DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Hold safety meeting. Establish pump rate. Mix & Pump 100# Gel Flush. Mix & Pump 94 sks 50/50 Poz Mix Cement 2% Gel 5% Salt 5# Kol Seal/sk. Cement to surface. Flush pump & lines clean. Displace 2 1/2" Rubber plug to Baffle Pressure to 800# PSI. Release pressure to set float valve. Shut in casing.

TOS Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085.00
5406	30 mi	MILEAGE	495	126.00
5402	736	Casing footage	N/A	
5407	Minimum	Ten Miles	548	368.00
5502C	1 1/2 hr	80 BBL Vac Truck	675	150.00
		Sub Total		1729.00
		less 30%		- 518.70
				1210.30
1124	94 sks	50/50 Poz Mix Cement	1081.00	
1118 B	258#	Premium Gel	562.00	
1111	190#	Granulated Salt	71.00	
1110 A	470#	Kol Seal	216.30	
		Material	1425.00	
		less 30%		- 427.50
		Total		997.50
4402	.1	2 1/2" Rubber Plug Less 30%	29.50	20.65
			7.65%	77.89
		SALES TAX		77.89
		ESTIMATED TOTAL		2306.88

Completed

Revin 3737

AUTHORIZATION Bryan Mader

TITLE _____

DATE 3/29/83

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.