



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1272938  
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: \_\_\_\_\_



1272938

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](mailto: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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Miami County, KS  
 Well: Morrow A-8  
 Lease Owner: Altavista Energy

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

Commenced Spudding:  
 7-13-2015

WELL LOG

Thickness of Strata	Formation	Total Depth
0 - 6	Soil - Clay	6
40	Lime	46
38	Shale	84
13	Lime	97
14	Shale	111
4	Lime	115
40	Shale	155
10	Lime	165
16	Shale	181
25	Lime	206
8	Shale	214
20	Lime	234
4	Shale	238
3	Lime	241
6	Shale	247
6	Lime	253
7	Shale	260
1	Sand	261
3	Sand	264
17	Shale	281
7	Sand	288
9	Sand	297
4	Sand	301
19	Sandy Shale	320
46	Shale	366
6	Sand	372
3	Sandy Shale	375
27	Shale	402
4	Limey Sand	406
28	Shale	434
2	Limey Sand	436
18	Shale	454
5	Lime	459
3	Shale	462
5	Lime	467
5	Shale	472
9	Lime	481
18	Shale	499
4	Lime	503
9	Shale	512



# 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-8

Farm Morrow

KS (State) Miami (County)

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

For Altavista Energy inc (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 - clay	6	field stone
40	Lime	46	
38	shale	84	
13	Lime	97	
14	shale	111	redbed
4	Lime	115	
40	shale	155	
10	Lime	165	
16	shale	181	
25	Lime	206	slight show
8	shale	214	
20	Lime	234	
4	shale	238	
3	Lime	241	
6	shale	247	
6	Lime	253	Hertha
7	shale	260	
1	sand	261	oil - broken
3	sand	264	no oil
17	shale	281	
7	sand	288	no oil
9	sand	297	gas
4	sand	301	oil show - broken
19	sandy shale	320	
46	shale	366	
6	sand	372	
3	sandy shale	375	grey

375

Thickness of Strata	Formation	Total Depth	Remarks
27	Shale	402	
4	limy sand	406	
28	Shale	434	no oil
2	limy sand	436	
18	Shale	454	slight show
5	Lime	459	
3	Shale	462	
5	Lime	467	
5	Shale	472	
9	Lime	481	
18	Shale	499	
4	Lime	503	
9	Shale	512	
3	Lime	515	
1	Shale	516	
2	Lime	518	
6	Shale	524	
1	Lime	525	
2	Shale	527	
5	Lime	532	
8	Shale	540	
1	Lime	541	
24	Shale	565	
1	Lime	566	
38	Shale	604	
3	sand	607	
9	sandy shale	616	no oil







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# 804974

Invoice Date: 07/20/15 Terms: Net 30 Page 1

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

morrow # a-8

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	1,500.0000	46.000	810.00
CE0002	Equipment Mileage Charge - Heavy Equipment	30.000	7.1500	46.000	115.83
CE0711	Minimum Cement Delivery Charge	1.000	660.0000	46.000	356.40
WE0853	80 BBL Vacuum Truck (Cement Services)	2.000	100.0000	46.000	108.00
CC5840	Poz-Blend I A (50:50)	129.000	13.5000	46.000	940.41
CC5965	Bentonite	417.000	0.3000	46.000	67.55
CC5326	Sodium Chloride, Salt	271.000	0.7500	46.000	109.76
CC6077	Kolseal	645.000	0.5000	46.000	174.15
CP8176	2 7/8" Top Rubber Plug	1.000	45.0000	46.000	24.30

Subtotal 5,011.85  
 Discounted Amount 2,305.45  
 SubTotal After Discount 2,706.40

Amount Due 5,206.84 If paid after 08/19/15

Tax: 105.29  
 Total: 2,811.69



**CONSOLIDATED**  
Oil Well Services, LLC

3524  
3451

TICKET NUMBER 49724

LOCATION Ottawa, KS

FOREMAN Casey Kennedy

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

Invoice # **804974**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/14/15	3244	Morrow # A-8	SE 17	116	24	Mi
CUSTOMER <u>Havista Energy</u>			TRUCK #			
MAILING ADDRESS <u>PO Box 128</u>			DRIVER			
CITY <u>Wellsville</u>			STATE <u>KS</u>			
STATE <u>KS</u>			ZIP CODE <u>66092</u>			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			729	Casey Kennedy	✓	✓
			467	Kei Car	✓	✓
			548	Trobor	✓	✓
			309	Mikhaa	✓	✓

JOB TYPE longstring HOLE SIZE 6 3/4" HOLE DEPTH 700' CASING SIZE & WEIGHT 2 7/8" EUE  
 CASING DEPTH 1084' DRILL PIPE \_\_\_\_\_ TUBING baffle - 652' OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 32'  
 DISPLACEMENT 3.77 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5.5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 200 # Gel followed by 10 bbls fresh water mixed & pumped 129 sks 50/50 Pozblend cement w/ 2% gel, 5% salt, 5 # Kd seal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to baffle w/ 3.77 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
CE0450	1	PUMP CHARGE	1500.00	✓
CE0002	30 mi	MILEAGE	214.50	✓
CE0711	main	ten mileage	600.00	✓
WE0853	2 hrs	80 Vac	200.00	✓
		trucks	2574.50	
		-46%	1184.27	
		subtotal		1390.23
CC5840	129 sks	50/50 Pozblend	1741.50	✓
CC5965	417 #	Gel	125.10	✓
CC5326	271 #	Salt	203.25	✓
CC6077	645 #	Kd seal	322.50	✓
CP8176	1 #	Salt	45.00	✓
		materials	2437.35	
		-46%	1121.18	
		subtotal		1316.17
		8%	SALES TAX	105.29 ✓
		ESTIMATED TOTAL		2811.69 ✓

Flavin 3737

AUTHORIZATION Byron Miller TITLE \_\_\_\_\_ DATE (5206.84)

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.