

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1307097

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

<input type="checkbox"/> Oil	<input type="checkbox"/> WSW	<input type="checkbox"/> SWD	<input type="checkbox"/> SIOW
<input type="checkbox"/> Gas	<input type="checkbox"/> D&A	<input type="checkbox"/> ENHR	<input type="checkbox"/> SIGW
<input type="checkbox"/> OG		<input type="checkbox"/> GSW	<input type="checkbox"/> Temp. Abd.
<input type="checkbox"/> CM (Coal Bed Methane)			
<input type="checkbox"/> Cathodic <input type="checkbox"/> Other (Core, Expl., etc.): _____			

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

<input type="checkbox"/> Deepening	<input type="checkbox"/> Re-perf.	<input type="checkbox"/> Conv. to ENHR	<input type="checkbox"/> Conv. to SWD
<input type="checkbox"/> Plug Back		<input type="checkbox"/> Conv. to GSW	<input type="checkbox"/> Conv. to Producer
<input type="checkbox"/> Commingled		Permit #: _____	
<input type="checkbox"/> Dual Completion		Permit #: _____	
<input type="checkbox"/> SWD		Permit #: _____	
<input type="checkbox"/> ENHR		Permit #: _____	
<input type="checkbox"/> 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: \_\_\_\_\_



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 <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:				

<b>CASING RECORD</b> <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:  <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives

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	

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 (Explain) _____					
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. (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____				PRODUCTION INTERVAL:  <hr/> <hr/>	
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Form	ACO1 - Well Completion						
Operator	Altavista Energy, Inc.						
Well Name	John Flake AI-3						
Doc ID	1307097						

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	9.875	7	17	23	Portland	3	NA
Production	5.625	2.875	7	574	50/50 Poz	75	See Ticket

Miami County, KS  
Well: John Flake AI-3  
Lease Owner: AltaVista

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

Commenced Spudding:  
1/27/16

## WELL LOG

# 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  $\times 34.2$

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. AI-3

Farm John Flake

KS

(State)

Miami

(County)

8

(Section)

18

(Township)

24

(Range)

For Altavista Energy Inc  
(Well Owner)

**Town Oilfield  
Services, Inc.**

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

John	Flake	Farm:	Miami	County
KS		State; Well No.	AI-3	
Elevation 933				
Commenced Spuding 1-27 16				
Finished Drilling 1-28 16				
Driller's Name Wesley Dillard				
Driller's Name				
Driller's Name				
Tool Dresser's Name Ryan Ward				
Tool Dresser's Name				
Tool Dresser's Name				
Contractor's Name TOS				
8 18 24				

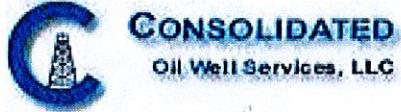
(Section)	(Township)	(Range)
Distance from _____	S	line, 330
Distance from _____	E	line, 30
ft.		
3 sacks		
8 hrs		
5 7/8 borehole		
2 7/8 casing		
<b>CASING AND TUBING</b>		
<b>RECORD</b>		

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

## CASING AND TUBING MEASUREMENTS

Thickness of Strata	Formation	Total Depth	Remarks
0-20	Soil - clay	20	
18	Shale	38	
8	Lime	46	
12	Shale	58	
32	Lime	90	
8	Shale	98	
20	Lime	118	
4	Shale	122	
2	Lime	124	
5	Shale	129	
5	Lime	134	
26	Shale	160	Heights
2	limy sand	162	no O.I
44	Sandy shale	206	
86	Shale	292	
7	Sand	299	water
47	Shale	346	
5	Lime	351	
22	Shale	373	
4	Lime	377	
15	Shale	392	
4	Lime	396	
12	Shale	408	
21	Lime	429	
23	Shale	452	
3	Lime	455	
46	Shale	501	

501



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#

806949

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Invoice Date: 01/31/16

Terms: Net 30

Page 1

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ALTAVISTA ENERGY INC

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

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john flake #ai-3

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)	1.500	100.0000	46.000	81.00
CC5840	Poz-Blend I A (50:50)	75.000	13.5000	46.000	546.75
CC5965	Bentonite	226.000	0.3000	46.000	36.61
CC5326	Sodium Chloride, Salt	174.000	0.7500	46.000	70.47
CC6077	Kolseal	375.000	0.5000	46.000	101.25
CP8176	2 7/8" Top Rubber Plug	1.000	45.0000	46.000	24.30
CC6128	Mud Flush - C	0.500	50.0000	46.000	13.50
				Subtotal	3,992.80
				Discounted Amount	1,836.69
				SubTotal After Discount	2,156.11

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Amount Due 4,110.26 If paid after 03/01/16

Tax:	63.43
Total:	2,219.54



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

5250  
5101  
Invoice#806949

TICKET NUMBER 49978

LOCATION Ottawa KS

FOREMAN Fred Maden

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-28-16	3244	John Flake # AJ3	SE 8	18	24	MI
CUSTOMER						
Altavista Energy Inc.						
MAILING ADDRESS		P. O. Box 128				
CITY	STATE	ZIP CODE				
Wellsville	KS	66092				

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fre Maden		
495	Har Beck		
510	Kai Dier		
510	Mikhael		

JOB TYPE hang & string, HOLE SIZE 5 1/8 HOLE DEPTH 6000 CASING SIZE & WEIGHT 2 7/8 x 6 1/2  
CASING DEPTH 5731 DRILL PIPE Baffle TUBING 548 OTHER   
SLURRY WEIGHT  SLURRY VOL.  WATER gal/sk  CEMENT LEFT in CASING   
DISPLACEMENT 3.18 BBL DISPLACEMENT PSI  MIX PSI  RATE 46 PPM

REMARKS: Hold Safety meeting. Establish pump rate. Pump 1/2 Gal Mud Flush 2". Circulate well to condition hole. Mix & Pump 100# Cool Flush. Mix + Pump 75 SK Por Blend I/A Cement 2% Gal 5% Salt 5# Kal Seal/sk. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to Baffle in casing. pressure to 800# PSI. Release pressure to set float value. Shut in Casing.

To S Drilling - Wesley Dallard

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE 0450	1	PUMP CHARGE	495	1500.00
CE 0002	30 mi	MILEAGE	495	2145.00
CE 0711	Min. num	Ton Miles Delivery	510	660.00
WE 0853	1 1/2 hr	FOB BBL Vac Truck	675	150.00
		Sub Total		2524.00
		Less 46%	- 1161.27	1362.73

CC 5840	75 sks	Por Blend I/A Cement	1012.50
CC 5965	226#	Bentonite Gal	167.00
CC 5326	174#	Salt	180.50
CC 6077	375#	Kal Seal	187.50
CP 8176	1	2 1/2" Rubber Plug	45.00
CC 6128	1/2 Gal	Mud Flush C	25.00
		Sub Total	1468.30
		Less 46%	- 675.42
			792.88
		8%	SALES TAX
			ESTIMATED
			TOTAL

Ravin 3737  
AUTHORIZATION Bryan Miles TITLE  DATE (4/10/26)

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.