

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1313444

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: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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>	☐ Yes	☐ No	☐ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes	☐ No	Name	Top	Datum
Cores Taken	☐ Yes	☐ No			
Electric Log Run	☐ Yes	☐ No			
List All E. Logs Run:					

CASING RECORD ☐ New ☐ 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
☐ Perforate				
☐ Protect Casing				
☐ Plug Back TD				
☐ 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 (Amount and Kind of Material Used)	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	Bbbs.	Gas	Mcf	Water	Bbbs.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> ☐ Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	--	---

Form	ACO1 - Well Completion
Operator	Altavista Energy, Inc.
Well Name	O'BRIEN A-42
Doc ID	1313444

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	4	NA
Production	5.625	2.875	7	587	50/50 Poz	72	See Ticket

Miami County, KS
Well: O'Brien A-42
Lease Owner: AltaVista

Town Oilfield Service, Inc.
(913) 294-2125

Commenced Spudding:
6/10/16

WELL LOG

Thickness of Strata	Formation	Total Depth
0-33	Soil-Clay	33
7	Shale	40
19	Lime	59
9	Shale	68
2	Lime	70
9	Shale	79
8	Lime	87
42	Shale	129
15	Lime	144
10	Shale	154
11	Lime	165
3	Shale	168
14	Lime	182
8	Shale	190
21	Lime	211
5	Shale	216
4	Lime	220
2	Shale	222
6	Lime	228
137	Shale	365
17	Lime	382
8	Shale	390
6	Lime	396
2	Shale	398
4	Lime	402
42	Shale	444
7	Lime	451
12	Shale	463
3	Lime	466
17	Shale	483
7	Lime	490
18	Shale	508
2	Lime	510
3	Shale	513
6	Lime	519
3	Shale	522
1	Sand	523
5	Sand	528
1	Sand	529
6	Sand	535

Miami County, KS
Well: O'Brien A-42
Lease Owner: AltaVista

Town Oilfield Service, Inc.
(913) 294-2125

Commenced Spudding:
6/10/16

[illegible]

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 - RPMxd over SPMxR

d - SPMxRx D over RPM

SPM - RPMxD over Rx D

R - RPMxD over SPMxD

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-42

Farm O'Brien

KS Miami
(State) (County)

1 18 21
(Section) (Township) (Range)

For Altavista Energy Inc
(Well Owner)

Town Oilfield Services, Inc.

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

O'Brien Farm: Miami County

KS State; Well No. A-42

Elevation 925

Commenced Spuding 6-10 20 16

Finished Drilling 6-13 20 16

Driller's Name Wesley Dillard

Driller's Name _____

Driller's Name _____

Tool Dresser's Name Kyle Ward

Tool Dresser's Name _____

Tool Dresser's Name _____

Contractor's Name 103

1 18 21

(Section) (Township) (Range)

Distance from 5 line, 670 ft.

Distance from E line, 1825 ft.

4 sacks

8h15

5 5/8 bare hole

27/8 Casino

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____

8" Set _____ 8" Pulled _____

7/8" Set 23 6 1/4" Pulled

4" Set _____ 4" Pulled _____

2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

[illegible]

Thickness of Strata	Formation	Total Depth	Remarks
0-33	Soil - Clay	33	
7	Shale	40	
19	Lime	59	
9	Shale	68	
2	Lime	70	
9	Shale	79	
8	Lime	87	
42	Shale	129	
15	Lime	144	
10	Shale	154	
11	Lime	165	
3	Shale	168	
14	Lime	182	
8	Shale	190	
21	Lime	211	
5	Shale	216	
4	Lime	220	
2	Shale	222	
6	Lime	228	Has the
137	Shale	365	
17	Lime	382	
8	Shale	390	
6	Lime	396	
2	Shale	398	
4	Lime	402	
42	Shale	444	
7	Lime	451	

[illegible]



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#

807802

Invoice Date: 06/17/16

Terms: Net 30

Page 1

ALTAVISTA ENERGY INC

PO BOX 128
WELLSVILLE KS 66092
USA
7858834057

OBRIAN #A-42

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	1,500.0000	62.000	570.00
CE0002	Equipment Mileage Charge - Heavy Equipment	20.000	7.1500	62.000	54.34
CE0711	Minimum Cement Delivery Charge	1.000	660.0000	62.000	250.80
WE0853	80 BBL Vacuum Truck (Cement Services)	1.000	100.0000	62.000	38.00
CC5840	Poz-Blend I A (50:50)	72.000	13.5000	62.000	369.36
CC5965	Bentonite	221.000	0.3000	62.000	25.19
CC5326	Sodium Chloride, Salt	151.000	1.0000	62.000	57.38
CC6077	Kolseal	360.000	0.5000	62.000	68.40
CP8176	2 7/8" Top Rubber Plug	1.000	45.0000	62.000	17.10

Subtotal 3,817.30

Discounted Amount 2,366.73

SubTotal After Discount 1,450.57

Amount Due 3,930.44 If paid after 07/17/16

Tax: 42.99

Total: 1,493.56



CONSOLIDATED
Oil Well Services, LLC

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

FIELD TICKET & TREATMENT REPORT
CEMENT

801802
5949
5653
TICKET NUMBER 50050
LOCATION Chanute, KS
FOREMAN Carey Kennedy

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6/13/16	3244	O'Brian # A-42	SE 1	18	21	LL
CUSTOMER <u>Altavista Energy</u>						
MAILING ADDRESS <u>PO Box 128</u>						
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66092</u>				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			729	Car Ken	✓ Safety	Meeting
			467	Kei Car	✓	
			558	Mik Han	✓	
			675	Kei Det	✓	

JOB TYPE longstring HOLE SIZE 5 5/8" HOLE DEPTH 6000' CASING SIZE & WEIGHT 2 1/8" EUE
CASING DEPTH 558' DRILL PIPE TUBING baffle - 555' OTHER
SLURRY WEIGHT 3.21 bbls SLURRY VOL 33' WATER gal/sk 4 bpm CEMENT LEFT in CASING 33'
DISPLACEMENT 3.21 bbls DISPLACEMENT PSI 4 bpm RATE 4 bpm

REMARKS: hold safety meeting, established circulation, mixed + pumped 100 # gel followed by 5 bbls fresh water, mixed + pumped 72 sks Portland 1A cement w/ 2% gel, 5% salt, + 5 # Kalseal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to baffle w/ 3.21 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 ✓	20 mi	✓ MILEAGE	143.00	
CE0711 ✓	min	✓ ten mileage	600.00	
WE0853 ✓	1 hr	✓ 80 Vac	100.00	
		trucks	2403.00	
		- 62%	1489.86	
		subtotal		913.14
81% CC5840 ✓	72 sks	✓ Portland 1A cement	972.00	
CC5965 ✓	221 #	✓ Gel	66.30	
CC5326 ✓	151 #	✓ Salt 1.00	151.00	
CC6077 ✓	360 #	✓ Kalseal .50	180.00	
CP8176 ✓	1	✓ 2 1/2" rubber plug	45.00	
		materials	1414.30	
		- 62%	876.87	
		subtotal		537.43
		8%	SALES TAX	42.99 ✓
		ESTIMATED TOTAL		1493.56 ✓
		DATE		(3930.44) ✓

Revin 3737

AUTHORIZATION No Co Rep TITLE _____ 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.