Kansas Corporation Commission Confidentiality Requested: OIL & GAS CONSERVATION DIVISION Yes No

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 #		API No. 15				
Name:		Spot Description:				
Address 1:		SecTwpS. R East West				
Address 2:		Feet from North / South Line of Section				
City: State: Zi	p:+	Feet from _ East / _ West Line of Section				
Contact Person:		Footages Calculated from Nearest Outside Section Corner:				
Phone: ()		□NE □NW □SE □SW				
CONTRACTOR: License #		GPS Location: Lat:, Long:				
Name:		(e.g. xx.xxxxx) (e.gxxx.xxxxxx)				
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84				
Purchaser:		County:				
		Lease Name: Well #:				
Designate Type of Completion:	¬	Field Name:				
New Well Re-Entry	Workover	Producing Formation:				
☐ Oil ☐ WSW ☐ SWD	SIOW	Elevation: Ground: Kelly Bushing:				
Gas D&A ENHR	SIGW	Total Vertical Depth: Plug Back Total Depth:				
☐ OG ☐ GSW	Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet				
CM (Coal Bed Methane)						
Cathodic Other (Core, Expl., etc.):		Multiple Stage Cementing Collar Used?				
If Workover/Re-entry: Old Well Info as follows:		If yes, show depth set: Feet				
Operator:		If Alternate II completion, cement circulated from:				
Well Name:		feet depth to:w/sx cmt.				
Original Comp. Date: Original To	otal Depth:					
☐ Deepening ☐ Re-perf. ☐ Conv. to E	NHR Conv. to SWD	Drilling Fluid Management Plan				
☐ Plug Back ☐ Conv. to G	SW Conv. to Producer	(Data must be collected from the Reserve Pit)				
		Chloride content:ppm Fluid volume:bbls				
		Dewatering method used:				
		Leading of fletal diseased to be also define				
		Location of fluid disposal if hauled offsite:				
		Operator Name:				
GOVV Femilit#		Lease Name: License #:				
Spud Date or Date Reached TD	Completion Date or	Quarter Sec TwpS. R				
Recompletion Date	Recompletion Date	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:						



1315951 CORRECTION #1

Operator Name:				Lease N	Name: _			Well #:		
Sec Twp	S. R	East	West	County:	i					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ing and shut-in pressu	res, whet	her shut-in pre	ssure reacl	ned stati	c level, hydrosta	tic pressures, bott			
Final Radioactivity Log files must be submitte						gs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital electr	onic log
Drill Stem Tests Taken (Attach Additional S		Ye	es No		L		on (Top), Depth an		Sampl	
Samples Sent to Geol	ogical Survey	Ye	s No		Nam	е		Тор	Datum	1
Cores Taken Electric Log Run		☐ Ye								
List All E. Logs Run:										
			CASING	RECORD	Ne	w Used				
		Repo	rt all strings set-c	conductor, su	rface, inte	ermediate, producti	on, etc.		I	
Purpose of String	Size Hole Drilled		e Casing (In O.D.)	Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used	Type and Pe Additive	
			ADDITIONAL	CEMENTIN	IG / SQL	JEEZE RECORD				
Purpose: Depth Top Bottom Protect Casing Plug Back TD		Туре	Type of Cement # Sacks Used		Used	Type and Percent Additives				
Plug Off Zone										
	ulic fracturing treatment or otal base fluid of the hydra ing treatment information	aulic fractu	ring treatment ex	,	U	? Yes	No (If No, ski	p questions 2 ar p question 3) out Page Three		
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						
Spoony i solage of East interval i chorated				,			_			
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 C	Other (Explain)						
Estimated Production Per 24 Hours	Oil B	bls.	Gas	Mcf	Wate	er Bl	ols. G	as-Oil Ratio	Gra	avity
DISPOSITIO	ON OF GAS:		N.	METHOD OF	COMPI F	TION:		PRODUCTIO	ON INTERVAL:	
Vented Sold			pen Hole	Perf.	Dually	Comp. Con	nmingled		IIII EIIVAE.	
(If vented, Sub			Other (Specify)		(Submit)	ACO-5) (Subi	mit ACO-4)			

Form	ACO1 - Well Completion
Operator	Altavista Energy, Inc.
Well Name	Roy Beets AI-51
Doc ID	1315951

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	9.875	7	17	20	Portland	3	NA
Production	5.625	2.875	7	712	50/50 Poz	90	See Ticket

Summary of Changes

Lease Name and Number: Roy Beets AI-51

API/Permit #: 15-121-31230-00-00

Doc ID: 1315951

Correction Number: 1

Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved Date	07/19/2016	09/01/2016
Method Of Completion - Perf	No	Yes
Perf_Record_1		602-617 - 32 Perfs - 2" DML RTG
Perf_Shots_1		2
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=13 12233	//kcc/detail/operatorE ditDetail.cfm?docID=13 15951