

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 TCores aken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <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 <div style="display: flex; justify-content: space-between;"> Name Top Datum </div>
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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
____ Perforate				
____ Protect Casing				
____ Plug Back TD				
____ Plug Off Zone				

1. Did you perform a hydraulic fracturing treatment on this well? ☐ Yes ☐ No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? ☐ Yes ☐ No *(If No, skip question 3)*
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)*

Date of first Production/Injection or Resumed Production/Injection:		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____						
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> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: <div style="display: flex; justify-content: space-between;"> Top Bottom </div>
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Altavista Energy, Inc.
Well Name	KNOCHE A-26
Doc ID	1377401

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	21	Portland	3	NA
Production	5.625	2.875	6.5	528	50/50 Poz	70	See Ticket

Commenced Spudding:
10/3/17

[illegible]

[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 - $\text{RPM} \times d$ over $\text{SPM} \times R$

d - $\text{SPM} \times R \times D$ over RPM

SPM - $\text{RPM} \times D$ over $R \times d$

R - $\text{RPM} \times D$ over $\text{SPM} \times d$

BELT LENGTH - $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

* Need these to figure belt length

TO FIGURE AMPS: $\frac{\text{WATTS}}{\text{VOLTS}} = \text{AMPS}$

746 WATTS equal 1 HP

Log Book

Well No. A-26

Farm Knoche

KS Miami
(State) (County)

16 18 24
(Section) (Township) (Range)

For Altavista Energy
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

2" Set _____ 2" Pulled _____

Thickness of Strata	Formation	Total Depth	Remarks
0-6	soil - clay	6	
2	Lime	8	
14	Shale	22	
30	Lime	52	
9	Shale	61	
20	Lime	81	
4	Shale	85	
3	Lime	88	
4	Shale	92	
6	Lime	98	Hertha
23	Shale	121	
11	sand	132	broken - good O.I. show
124	Shale	256	
10	sandy Lime	266	white - no O.I.
39	Shale	305	
5	Lime	310	
11	Shale	321	
2	Lime	323	
7	Shale	330	
8	Lime	338	
16	Shale	354	
4	Lime	358	
12	Shale	370	
24	Lime	394	
7	Shale	401	
3	Lime	404	
9	Shale	413	

[illegible]



REMIT TO
QES Pressure Pumping 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# 811559

Invoice Date: 10/25/17 Terms: Net 30 Page 1

ALTAVISTA ENERGY INC
PO BOX 128
WELLSVILLE KS 66092
USA
7858834057
KNOCHE A-26

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	1,500.0000	55.000	675.00
CE0002	Equipment Mileage Charge - Heavy Equipment	30.000	7.1500	55.000	96.53
CE0711	Minimum Cement Delivery Charge	1.000	660.0000	55.000	297.00
WE0853	80 BBL Vacuum Truck (Cement Services)	2.000	100.0000	55.000	90.00
CC5840	Poz-Blend I A (50:50)	70.000	13.5000	55.000	425.25
CC5965	Bentonite	218.000	0.3000	55.000	29.43
CC5326	Sodium Chloride, Salt	147.000	1.0000	55.000	66.15
CC6077	Kolseal	350.000	0.5000	55.000	78.75
CP8176	2 7/8" Top Rubber Plug	1.000	45.0000	55.000	20.25

Subtotal 3,951.90
Discounted Amount 2,173.55
SubTotal After Discount 1,778.35

Amount Due 4,062.09 If paid after 11/24/17

Tax: 49.59
Total: 1,827.95



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

FIELD TICKET & TREATMENT REPORT CEMENT

TICKET NUMBER 53881

LOCATION Ottawa KS

FOREMAN Fred Maden

INVOICE # 811559

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-20-17	3244	Knoche A-26	NW 16	18	24	mi
CUSTOMER <u>Alta Vista Energy Inc</u>						
MAILING ADDRESS <u>P.O. Box 128</u>						
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66092</u>				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			712	Fve Mad		
			495	Har Bee		
			369	Mik Hae		
			804	Wei Dax		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 560 CASING SIZE & WEIGHT 2 7/8 EUE
CASING DEPTH 526 DRILL PIPE Baffle in TUBING @ 497 OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT 2.9 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.6 PM

REMARKS: Hold Safety Meeting. Establish pump rate. Mix & Pump 100# Gel Flush. Mix & Pump 70 SKS Poz Blend IA Cement. 2% Gel 5% Salt 5# Kol Seal/sk. Cement to Surface. Flush Pump & Lines clean. Displace 2 1/2" Rubber plug to Baffle in Casing. Pressure to 800# PSL. Release pressure to set float valve. Shut in Casing.

TOS Drilling - (Cresley Dillard)

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0400	1	PUMP CHARGE	495	1500.00
CE0002	30 mi.	MILEAGE	495	214.50
CE0711	Minimum	Ten Miles Delivery	804	660.00
WE0853	2 hrs	80 BBL Vac Truck	369	200.00
		Sub Total		2574.50
		less 55%		1158.53
14371 CC5640	70 SKS	Poz Blend IA Cement	945	
CC5965	218#	Bentonite Gel	65.00	
CC5326	147#	Salt	147.00	
CC6077	350#	Kol Seal	175.00	
CP8176	1	2 1/2" Rubber Plug	45.00	
		Sub Total		1377.00
		less 55%		619.83
		8%		
		SALES TAX		49.59
		ESTIMATED TOTAL		1827.95

Ravin 3737

AUTHORIZATION _____

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.