

Confidentiality Requested:

Yes  No

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION**

Form ACO-1

January 2018

**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

Gas  DH  EOR

OG  GSW

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 EOR  Conv. to SWD  
 Plug Back  Liner  Conv. to GSW  Conv. to Producer

Commingled Permit #: \_\_\_\_\_

Dual Completion Permit #: \_\_\_\_\_

SWD Permit #: \_\_\_\_\_

EOR Permit #: \_\_\_\_\_

GSW Permit #: \_\_\_\_\_

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: \_\_\_\_\_

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  Drill Stem Tests Received

Geologist Report / Mud Logs 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 <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 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  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				

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) (Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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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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# DRILLERS LOG

API NO: 15 - 207 - 29694 - 00 - 00

S. 11 T. 24 R. 16 E. W.

OPERATOR: ALTAVISTA ENERGY INC

LOCATION: NW NE SE NW

ADDRESS: 4595 K-33 HWY, P.O. BOX 128, WELLSVILLE, KS 66092

COUNTY: WOODSON

ELEV. GR.: 1069

WELL #: AI - 40

LEASE NAME: STRAHM WEST

DF: \_\_\_\_\_ KB: \_\_\_\_\_

FOOTAGE LOCATION: 3640 FEET FROM (N) (S) LINE 3040 FEET FROM (E) (W) LINE

CONTRACTOR: FINNEY DRILLING COMPANY

GEOLOGIST: DOUG EVANS

SPUD DATE: 9/27/2018

TOTAL DEPTH: 1114 P.B.T.D. \_\_\_\_\_

DATE COMPLETED: 10/1/2018

OIL PURCHASER: COFFEYVILLE RESOURCES CRUDE TRANSPORTATION

## CASING RECORD

REPORT OF ALL STRINGS - SURFACE, INTERMEDIATE, PRODUCTION, ETC.

PURPOSE OF STRING	SIZE HOLE DRILLED	SIZE CASING SET (in O.D.)	WEIGHT LBS/FT	SETTING DEPTH	TYPE CEMENT	SACKS	TYPE AND % ADDITIVES
SURFACE:	12.2500	7	24	45.00	1	12	MIXED BY RIG
PRODUCTION:	5.8750	2.8750	6.5	1105.35	70-30	135	SERVICE COMPANY

## WELL LOG

CORES: # NONE

RAN: 1 - FLOAT SHOE

RECOVERED: \_\_\_\_\_

1 - BAFFLE

ACTUAL CORING TIME: \_\_\_\_\_

1 - CLAMP

3 - CENTRALIZERS

FORMATION	TOP	BOTTOM
TOP SOIL	0	3
CLAY	3	15
SHALE	15	152
LIME	152	195
SHALE & LIME	195	199
LIME	199	227
SHALE	227	239
LIME	239	286
SHALE	286	290
LIME	290	382
SHALE	382	384
LIME	384	443
SHALE	443	451
SHALE & LIME	451	456
SHALE & SAND	456	471
SHALE & LIME	471	474
SAND & SHALE	474	481
LIME	481	484
SAND & SHALE	484	487
LIME	487	489
SHALE	489	493
SAND & SHALE	493	504
LIME & SHALE	504	514
KC LIME	514	576
SHALE	576	582
LIME	582	591
SHALE	591	593
KC LIME	593	615
SHALE	615	618
KC LIME	618	628
SHALE	628	631
LIME	631	637
BIG SHALE	637	801
LIME	801	807
SHALE	807	824
LIME	824	834
SHALE	834	871
SHALE & LIME	871	877
SHALE & SAND	877	899
LIME	899	903
SAND & SHALE	903	909

FORMATION	TOP	BOTTOM
LIME	909	913
SAND & SHALE	913	925
LIME	925	929
SHALE	929	943
LIME	943	947
SAND & SHALE	947	964
LIME	964	968
SAND & SHALE	968	978
LIME	978	981
SHALE	981	983
SAND & SHALE	983	1018
CAP ROCK	1018	1020
SAND & SHALE & LIME	1020	1022
SAND & SHALE	1022	1024
SAND & SHALE	1024	1027
SAND & SHALE	1027	1030
SAND & SHALE	1030	1033
SAND & SHALE	1033	1036
SAND & SHALE	1036	1074
LIME	1074	1075
SHALE	1075	1102
LIME	1102	1104
SAND & SHALE	1104	1114 T.D.

OIL SHOW  
OIL SHOW  
OIL SHOW  
OIL SHOW  
NO SHOW



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# 814278

Invoice Date: 10/02/18 Terms: Net 30 Page 1

ALTAVISTA ENERGY INC  
PO BOX 128  
WELLSVILLE KS 66092  
USA  
7858834057

STRAHM WEST #AI-40

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	1,500.0000	45.000	825.00
CE0002	Equipment Mileage Charge - Heavy Equipment	40.000	7.1500	45.000	157.30
CE0711	Minimum Cement Delivery Charge	1.000	660.0000	45.000	363.00
WE0853	80 BBL Vacuum Truck (Cement Services)	2.000	100.0000	45.000	110.00
CC5840	Poz-Blend I A (50:50)	141.000	13.5000	45.000	1,046.93
CC5965	Bentonite	337.000	0.3000	45.000	55.61
CC5326	Sodium Chloride, Salt	296.000	1.0000	45.000	162.80
CC6077	Kolseal	705.000	0.5000	45.000	193.88
CP8176	2 7/8" Top Rubber Plug	1.000	45.0000	45.000	24.75

Subtotal 5,344.10  
Discounted Amount 2,404.85  
SubTotal After Discount 2,939.25

Amount Due 5,546.46 If paid after 11/01/18

Tax: 111.30  
Total: 3,050.57





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

11737  
 11620

TICKET NUMBER 55473  
 LOCATION Ottawa, KS  
 FOREMAN Carey Kennedy

FIELD TICKET & TREATMENT REPORT  
 CEMENT

Invoice # 814278

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/11/18	3244	Strahm West # A1-40	NW 11	24	16	WO

CUSTOMER Altavista Energy  
 MAILING ADDRESS PO Box 128  
 CITY Wellsville STATE KS ZIP CODE 66092

TRUCK #	DRIVER	TRUCK #	DRIVER
503 /	CarKen	✓ Safety	Meeting
467 /	KeiCar	✓	
675 /	KeiDet	✓	
		669	Jim Gre *

JOB TYPE long string HOLE SIZE 5 7/8" HOLE DEPTH 1110' CASING SIZE & WEIGHT 2 7/8" EUE  
 CASING DEPTH 7105' DRILL PIPE \_\_\_\_\_ TUBING baffle - 1075' OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 30'  
 DISPLACEMENT 6.22 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 bpm

REMARKS: held safety machine, established circulation, mixed & pumped 100 # Gel followed by 5 bbls fresh water, mixed & pumped 141 stks Portland A cement w/ 2% gel, 5% salt, & 5 # Kalseal per stk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to well w/ 6.22 bbls fresh water, pressured to 800 PSI, released pressure to set that valve.

*AK*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500.00	✓
CE0002	40 mi	MILEAGE	286.00	✓
CE0711	min	ton mileage	1000.00	✓
WE0853	2 hrs	80 Vac	200.00	✓
		trucks	2646.00	
		- 45%	1190.70	
		subtotal		1455.30
CC5840	141 stks	Portland A cement	1903.50	✓
CC5965	337 #	Gel	101.10	✓
CC5326	296 #	Salt	296.00	✓
CC6077	705 #	Kalseal	352.50	✓
CP8176	1	2 1/2" rubber plug	45.00	✓
		materials	2698.10	
		- 45%	1214.15	
		subtotal		1483.95
		7.5%		
		SALES TAX		111.30
		ESTIMATED TOTAL		3050.59

SCANNED

vin 3737 AUTHORIZATION Bryan Miller TITLE \_\_\_\_\_ DATE (5546.46)

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's