KOLAR Document ID: 1429917

Confiden	tiality 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 -	DESCRIPT	FII &	
VVELL	HISIONI -	DESCRIPT		LEASE

OPERATOR: License #	API No.:					
Name:	Spot Description:					
Address 1:						
Address 2:	Feet from Dorth / South Line of Section					
City: State: Zip:+	Feet from East / West Line of Section					
Contact Person:	Footages Calculated from Nearest Outside Section Corner:					
Phone: ()						
CONTRACTOR: License #	GPS Location: Lat:, Long:					
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)					
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84					
Purchaser:	County:					
Designate Type of Completion:	Lease Name: Well #:					
New Well Re-Entry Workover	Field Name:					
	Producing Formation:					
Gas DH EOR	Elevation: Ground: Kelly Bushing:					
	Total Vertical Depth: Plug Back Total Depth:					
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet					
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 Total Depth:						
Deepening Re-perf. Conv. to EOR Conv. to SWD	Drilling Fluid Management Plan					
Plug Back Liner Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)					
	Chloride content: ppm Fluid volume: bbls					
Commingled Permit #:	Dewatering method used:					
Dual Completion Permit #:						
SWD Permit #:	Location of fluid disposal if hauled offsite:					
EOR Permit #:	Operator Name:					
GSW Permit #:	License #:					
	Quarter Sec TwpS. R East West					
Spud Date orDate Reached TDCompletion Date orRecompletion DateRecompletion 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 Drill Stem Tests Received					
Geologist Report / Mud Logs Received					
UIC Distribution					
ALT I II III Approved by: Date:					

KOLAR Document ID: 1429917

Operator Name:	Lease Name: Well #:
Sec TwpS. R East 🗌 West	County:

Page Two

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 (Attach Additional Sheets)		Y	′es 🗌 No			og Formatio	n (Top), Depth a	and Datum	Sample
Samples Sent to Geolo			⁄es 🗌 No	1	Name	Э		Тор	Datum
Cores Taken Electric Log Run Geologist Report / Mud List All E. Logs Run:		□ Y □ Y	Yes ☐ No Yes ☐ No Yes ☐ No						
		Rep	CASING ort all strings set-c] Ne	w Used rmediate, productio	on. etc.		
Purpose of String	Size Hole Drilled	Siz	ze Casing et (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
[ADDITIONAL	CEMENTING /	SQU	EEZE RECORD			
Purpose: Depth Top Bottom		Туре	e of Cement	# Sacks Used		Sed Type and Percent Additives			
Protect Casing Plug Back TD Plug Off Zone									
 Did you perform a hydra Does the volume of the Was the hydraulic fracture 	total base fluid of the	hydraulic fr	acturing treatment		-	☐ Yes ns? ☐ Yes ☐ Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three	
Date of first Production/Inj Injection:	jection or Resumed Pr	oduction/	Producing Meth	iod:		Gas Lift 🗌 O	ther <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water Bbls. Gas-Oil Ratio Grav				Gravity
DISPOSITIO	N OF GAS:		METHOD OF			TION:		PRODUCTION INTERVAL: Top Bottom	
Vented Sold (If vented, Subn	Used on Lease		Open Hole		-	·	nit ACO-4)	Тор	Bollom
	foration Perform Top Botto		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeezend of Material Used)	
TUBING RECORD:	Size:	Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	Altavista Energy, Inc.
Well Name	STRAHM WEST AI-34
Doc ID	1429917

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set		Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	7	17	40	Portland	12	NA
Production	5.875	2.875	6.5	1101	50/50 Poz	135	See Ticket

		D	RILLE	RS LOG							
API NO: 15 - 207	- 29677 - 0	0 - 00					S. 11	T. 24	R. 16	<u>E.</u>	W.
OPERATOR: ALTAVIS	TA ENERG	Y INC	_				LC	CATION:	W2 E2	E2 NW	
			•					COUNTY:	WOODS	ON	•
ADDRESS: 4595 K-3	3 HWY, P.O	. BOX 128, WELLSVIL	LE, KS 660	92				ELEV. GR.:	1060		
WELL #: AI - 34	_	LEASE NAME:	STRAHM	WEST				DF:		КВ:	
OOTAGE LOCATION:	3960	FEET FROM	(N)	<u>(\$)</u> L	INE	2990	FEET	FROM	<u>(E)</u>	(W)	LINE
CONTRACTOR:	FINNEY D	RILLING COMPANY				GEC	DLOGIST:	DOUG E	ANS		
SPUD DATE:	9/21/	/2018				τοτα	L DEPTH:	1111	-	P.B.T.D.	
DATE COMPLETED:	9/25/	/2018			(DIL PUF	CHASER:	COFFEYVILI	E RESOUR	CES CRUDE T	RANSPORTAT
		C	ASING	RECORD							
REPORT OF ALL ST	RINGS - SU	IRFACE, INTERMEDIA	TE, PROD	UCTION, ETC.							
PURPOSE OF STRING	-	SIZE CASING SET (in O.D.)	-	SETTING DEI	PIR I	TYPE EMENT	SACKS	TYPE	AND % AD	DITIVES	1
SURFACE:	12.2500	7	24	40.00		1	12	MIXED BY	RIG		
PRODUCTION:	5.8750	2.8750	6.5	1101.45		70-30	128	SERVICE	COMPAN	Υ]
			WELLI	_OG							
CORES:	# NONE					RAN:	1 - FLOAT				

RECOVERED: ACTUAL CORING TIME: RAN: 1-FLOAT SHOE 1-BAFFLE 1-CLAMP 3-CENTRALIZERS

FORMATION	TOP	BOTTOM
TOP SOIL	0	2
CLAY	2	14
SHALE	14	31
LIME	31	33
SHALE	33	154
LIME	154	162
SHALE	162	164
LIME	164	168
SHALE	168	171
LIME	171	218
SHALE	218	230
LIME	230	279
SHALE	279	284
LIME	284	378
SHALE	378	382
LIME	382	437
SHALE	437	450
LIME	450	453
SHALE	453	469
LIME	469	473
SHALE	473	479
SHALE LIME & SAND	479	501
KC LIME	501	506
SHALE & LIME	506	512
KC LIME	512	572
SHALE	572	578
KC LIME	578	603
SHALE	603	607
KC LIME	607	624
SHALE	624	626
LIME	626	632
BIG SHALE	632	796
LIME	796	802
SHALE & LIME	802	811
SHALE	811	820
LIME	820	828
SHALE	828	830
LIME	830	832
SHALE	832	840
LIME & SHALE	840	842
SHALE	842	864
SAND	864	870

FORMATION	TOP	BOTTOM	И
SAND & SHALE	870	891	
LIME	891	893	
SHALE	893	898	
LIME	898	910	
SHALE	910	919	
LIME	919	924	
SHALE	924	925	
LIME & SHALE	925	928	
SHALE	928	938	
LIME	938	942	
SHALE	942	945	
LIME	945	946	
SHALE	946	957	
LIME	957	962	
SHALE	962	963	
LIME	963	964	
SHALE	964	966	
LIME	966	968	
SHALE	968	973	
LIME	973	974	
SHALE & SAND	974	1013	
CAP ROCK	1013	1014	
SAND & SHALE	1014	1016	
LIME SHALE & SAND	1016	1017	SHOW
SAND & SHALE	1017	1018	OIL SHOW FREE OIL
SAND & SHALE	1018	1022	GOOD SHOW FREE OIL
SAND & SHALE	1022	1026	SHOW LIGHT
SAND & SHALE	1026	1030	NO SHOW
SAND & SHALE	1030	1064	
LIME	1064	1067	
SHALE	1067	1111 T.D.	
		· · · -	
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		RE	EMIT TO			MAIN OFFICE
PRESSURE PUMPING LLC		QES Press D P.O Houston,		620/431-921	P.O.Box884 Chanute,KS 66720 10,1-800/467-8676 Fax 620/431-0012	
Invoice				Invoice#	814	211
Invoice Date:	======================================		Terms: Net 30		Page	1
ALTAVISTA ENE PO BOX 128 WELLSVILLE K USA			STR	AHM WEST AI-3	34	
7858834057						
Part No	Description		Quantity	Unit Price	Discount(%)	Total
CE0450	Cement Pump Ch	-	1.000	1,500.0000	45.000	825.00
CE0002	Equipment Mileag Equipment	e Charge - Heavy	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 T Services)	80 BBL Vacuum Truck (Cement		100.0000	45.000	137.50
CC5840	Poz-Blend I A (50:	50)	135.000	13.5000	45.000	1,002.38
CC5965	Bentonite		327.000	0.3000	45.000	53.96
CC5326	Sodium Chloride,	Salt	261.000	1.0000	45.000	143.55
CC6077	Kolseal		675.000	0.5000	45.000	185.63
CP8176	2 7/8" Top Rubber	Plug	1.000	45.0000	45.000	24.75
					Subtotal	5,260.10
				Discounte	ed Amount	2,367.05
				SubTotal After	r Discount	2,893.05
				Amount E	Due 5,452.41 lf p	oaid after 10/26/18
			10		Tax:	105.77
					Total:	2,998.84

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DISPLACEMENT [1, 22 DISPLACEMENT PSI 200 MIX PSI 200 PATE 4 400 PATE 4 400 PATE 4 62 Followed by 135 SK 102 Billion I A plas R bold of 5t Koldeal, 570 sslt. by 135 SK 102 Billion I A plas R bold of 5t Koldeal, 570 sslt. Pate 5 SG. K 102 Billion I A plas R bold of 5t Koldeal, 570 sslt. Plas to baffix. Well held 800 PSI Bet floot. Kurt's rig Account CODE QUANTY or UNITS DESCRIPTION of SERVICES or PRODUCT UNIT PRICE CEDRO2 4 40 MILEAGE 467 1500 (EPRO2 4 40 MILEAGE 467 1500 (EPRO2 4 40 MILEAGE 467 2860 (EPRO2 4 40 MILEAGE 467 2860 (ECS 840 4 135 80 44c 558 660 (CS 840 4 135 Poz Bleve I 1835 (CS 840 4 135 Poz Bleve I 1935 (CS 840 4 135 Poz Bleve I 1935		1.0				k	CEMENT LEFT in				
REMARKS: Hold Mer. Sting M: yel + fumfed 100 # fel followed. by 135 sk for Bland I.A plus R. g.g.l 5# Kolseal, 5% sslt. plus to baffle. Well held Boo PSI bet float. plus to baffle. Well held Boo PSI bet float. Account Wantry or UNITS CODE QUANITY or UNITS DESCRIPTION of SERVICES or PRODUCT UNIT PRICE CODE QUANITY or UNITS DESCRIPTION of SERVICES or PRODUCT UNIT PRICE CEOPAD HO MILEAGE 467 LEOTIL Min Tor M: LAS: 558 58 LOG DESCRIPTION of SERVICES or PRODUCT UNIT PRICE TOTAL PUMP CHARGE 467 18000000000000000000000000000000000000	DISPLACEMENT	1 0 .	Contract of the second of the second of	T PSI 800			111				
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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.