

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. 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
--	---

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

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:	
----------------	-------	---------	------------	--



CEMENT TREATMENT REPORT

Customer:	Altavista Energy	Well:	Owens, #A-58	Ticket:	EP13666
City, State:		County:	Miami, KS	Date:	6/5/2024
Field Rep:	Brian Miller	S-T-R:	8-18-22	Service:	L/S

Downhole Information	
Hole Size:	in
Hole Depth:	680 ft
Casing Size:	2 7/8 in
Casing Depth:	665 ft
Tubing / Liner:	in
Depth:	ft
Tool / Packer:	Baffle
Tool Depth:	633 ft
Displacement:	bbls

Calculated Slurry - Lead	
Blend:	EconoBond 1#PS
Weight:	13.5 ppg
Water / Sx:	7.1 gal / sx
Yield:	1.56 ft ³ / sx
Annular Bbls / Ft.:	bbs / ft.
Depth:	ft
Annular Volume:	0.0 bbls
Excess:	
Total Slurry:	bbls
Total Sacks:	sx

Calculated Slurry - Tail	
Blend:	
Weight:	ppg
Water / Sx:	gal / sx
Yield:	ft ³ / sx
Annular Bbls / Ft.:	bbs / ft.
Depth:	ft
Annular Volume:	0 bbls
Excess:	
Total Slurry:	0.0 bbls
Total Sacks:	0 sx

TIME	RATE	PSI	STAGE	TOTAL	REMARKS
			BBLs	BBLs	
2:30 PM			-	-	On location, held safety meeting
4.0			-	-	Hooked to casing, circulated 100 gal of mud flush for 30 min
4.0			-	-	Mixed and pumped 200# of bentonite gel followed by 4 BBL of water
4.0			-	-	Mixed and pumped 75 sks of econobond Cement with 1# PS, cement to surface
4.0			-	-	Flushed pump and lines clean
1.0			-	-	Dropped a 2 7/8" rubber plug and pumped it to baffle with 3.6 BBL of fresh water
1.0	800.0		-	-	Landed plug with 800PSI, well held pressure, released pressure to set float valve
4.0			-	-	Washed up equipment
3:30 PM			-	-	Left Location

	CREW		UNIT	SUMMARY		
				Average Rate	Average Pressure	Total Fluid
Cementer:	Garrett S.	97		3.1 bpm	800 psi	- bbls
Pump Operator:	Nick B	209				
Bulk #1:	Drew B	248				
Bulk #2:	Cooper R	110				

Miami County, KS

TDR Construction, Inc.

Commenced Spudding:

Well:A-58

(913) 710-5400

June 4, 2024

Lease Owner: Alta Vista Energy, Inc.

WELL LOG

Thickness of Strata	Formation	Total Depth
0-4	Soil/Clay	4
1	Lime	5
5	Soil/Clay	10
4	Lime	14
10	Shale	24
9	Lime	33
30	Shale	63
1	Lime	64
8	Shale	72
15	Lime	87
9	Shale	96
31	Lime	127
8	Shale	135
23	Lime	158
5	Shale	163
2	Lime	165
3	Shale	168
6	Lime/Hertha	174
21	Shale	195
39	Sandy Shale	234
40	Shale	274
3	Sand/Light Grey, No Oil	277
27	Shale	304
8	Sandy Lime/ Odor, No Oil	312
7	Sandy Shale	319
10	Shale	329
9	Lime	338
4	Shale	342
21	Sandy Shale	363
26	Shale	389
6	Lime	395
11	Shale	406
3	Lime	409
14	Shale	423
10	Lime	433
18	Shale	451
1	Lime	452
5	Shale	457
8	Lime	465
3	Shale	468

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 $BPH \times PSI \times .0004$

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 - SPMxRxD over RPM

SPM - RPMXD over RxD

R - RPMXD over SPMxD

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

* Need these to figure belt length

WATTS = AMPS

TO FIGURE AMPS: VOLTS

746 WATTS equal 1 HP

Log Book

Well No. A-58

Farm Owen

KS Miami
(State) (County)

8 18 22
(Section) (Township) (Range)

For Atta Vista Energy, LLC
(Well Owner) Inc.

Town Oilfield Services, Inc.

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

CASING AND TUBING MEASUREMENTS

Owen Farm: Miami County
 KS State: Well No. A-58
 Elevation: 896 Ft.
 Commenced Spudding June 4, 20 24
 Finished Drilling June 5, 20 24
 Driller's Name Ryan Ward
 Driller's Name _____
 Driller's Name _____
 Tool Dresser's Name Nathan Seaman
 Tool Dresser's Name _____
 Tool Dresser's Name _____
 Contractor's Name TDR Construction
 8 18 22

(Section) _____ (Township) _____ (Range) _____
 Distance from S line. 4700 ft.
 Distance from E line. 2720 ft.

3 Sacks Cement
 5-5/8" Bore hole
 9 1/2 hrs.
 2-7/8" casing

CASING AND TUBING RECORD

RECORD

10" Set _____ 10" Pulled _____
 8" Set _____ 8" Pulled _____
 7 1/2" Set 21' _____ 6 1/2" Pulled _____
 4" Set _____ 4" Pulled _____
 2" Set _____ 2" Pulled _____

Feet	In.	Feet	In.	Feet	In.
633.9					
665.5					
690					

Thickness of Strata	Formation	Total Depth	Remarks
0-4	Soil/Clay	4	
1	Lime	5	
5	Soil/Clay	10	
4	Lime	14	
10	Shale	24	
9	Lime	33	
30	Shale	63	
1	Lime	64	
8	Shale	72	
15	Lime	87	
9	Shale	96	
31	Lime	127	
8	Shale	135	
23	Lime	158	
5	Shale	163	
2	Lime	165	
3	Shale	168	
6	Lime	174	Hertha
21	Shale	195	
39	Sandy Shale	234	
40	Shale	274	
3	Sand	277	Light grey. No oil
27	Shale	304	
8	Sandy Lime	312	Odor. No oil
7	Sandy Shale	319	
10	Shale	329	
9	Lime	338	

Lime 338

Thickness of Strata	Formation	Total Depth	Remarks
4	Shale	342	
21	Sandy Shale	363	
26	Shale	389	
6	Lime	395	
11	Shale	406	
3	Lime	409	
14	Shale	423	
10	Lime	433	
18	Shale	451	
1	Lime	452	
5	Shale	457	
8	Lime	465	
3	Shale	468	
11	Sand	479	Slight odor. No oil
25	Sandy Shale	504	
72	Shale	576	
1	Sandy Shale	577	
1	Sand	578	Broken. Little oil show
1	Sand	579	Broken. Good oil show.
5	Sand	584	Mostly Solid. Good oil show
1	Sandy lime	585	Slight oil show.
12	Sand	597	Mostly Solid. Good oil show.
1	Sandy Shale	598	Slight oil show
21	Shale	619	
2	Sandy Shale	621	
27	Sand	648	Water
32	Shale	680	T.D.

TOP 7' perforate
595-597 dark sand (Black)