CORRECTION #1

KOLAR Document ID: 1837273

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 #	API No.:
Name:	Spot Description:
Address 1:	SecTwpS. R □East □ West
Address 2:	Feet from North / South Line of Section
City:	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:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
Oil	Elevation: Ground: Kelly Bushing:
OG GSW	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 □ Plug Back □ Liner □ Conv. to GSW □ Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content:ppm Fluid volume: bbls
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	·
GSW	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
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 Drill Stem Tests Received				
Geologist Report / Mud Logs Received				
UIC Distribution				
ALT I III Approved by: Date:				

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Operator Name: _				Lease Name:			Well #:	
Sec Twp	oS. R.	Eas	t West	County:				
	flowing and shu	ıt-in pressures, wh	ether shut-in pre	essure reached sta	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,
Final Radioactivity files must be subr						iled to kcc-well-lo	gs@kcc.ks.gov	. Digital electronic log
Drill Stem Tests Ta			Yes No		3	on (Top), Depth ar		Sample
Samples Sent to	Geological Surv	ey	Yes No	Na	me		Тор	Datum
Cores Taken Electric Log Run Geologist Report List All E. Logs Ru	_		Yes No Yes No Yes No					
List All L. Logs III	un.							
		Rep			New Used ntermediate, product	ion, etc.		
Purpose of Stri			ize Casing	Weight	Setting	Type of	# Sacks	Type and Percent
	o Dri	illed S	et (In O.D.)	Lbs. / Ft.	Depth	Cement	Used	Additives
			ADDITIONAL	CEMENTING / SO	UEEZE RECORD			
Purpose:	De	epth Tur	e of Cement	# Sacks Used	JOEEZE NEOGNO	Type and F	Percent Additives	
Perforate		Bottom	Type of Cernent # Sacks Oser		Type and Felcent Additives			
Protect Cas								
Plug Off Zo	ne							
2. Does the volume	of the total base fl	ing treatment on this luid of the hydraulic t	racturing treatmen	_		No (If No, sk	ip questions 2 an ip question 3) out Page Three o	
	tion/Injection or Re	esumed Production/	Producing Meth	nod:				
Injection:			Flowing	Pumping	Gas Lift C	Other (Explain)		
Estimated Product Per 24 Hours	ion	Oil Bbls.	Gas	Mcf W	ater B	bls. (Gas-Oil Ratio	Gravity
					PRODUCTIO			
✓ Vented ✓ Sold ✓ Used on Lease ✓ Open Hole ✓ Perf. ✓ Dually Comp. (Submit ACO-5)			,	mmingled mit ACO-4)	Тор	Bottom		
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid	Fracture, Shot, Cer	menting Squeeze	Record
1 000	ТОР	Bottom	1,700	001711		() unount and rane	or material Good)	
TUBING RECORD	: Size:	Set At	:	Packer At:				

Form	ACO1 - Well Completion
Operator	Altavista Energy, Inc.
Well Name	WINDLER AI-45
Doc ID	1837273

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	9.875	7	17	21	Portland	4	NA
Production	5.625	2.875	6.5	553	Econobon d	61	See Ticket

Summary of Changes

Lease Name and Number: WINDLER AI-45

API/Permit #: 15-121-31733-00-00

New Doc ID: 1837273
Parent Doc ID: 1682713
Correction Number: 1

Approved By: Kelsey Cox

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Date of First or 01/03/2025

Resumed Production or

SWD or Enhr

Electric Log Run? No Yes

Elogs_PDF

Gamma

Ray/Neutron/CCL

Fracturing Question 1 No Yes

Fracturing Question 2 No

Approved By David Befort Kelsey Cox

Approved Date 01/26/2023 04/04/2025

Method Of Completion - No Yes

Perf

Perf_acid1 31 Perfs - 2" DML RTG

Perf_perf1bottom 488

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Perf_perf1top		478
Perf_shots1		3
Producing Method Pumping	No	Yes
Production - Barrels Oil		3
Production Interval #1		478
Production Interval #3		488