

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34350
Name: Altavista Energy, Inc.
Address 1: 4595 K-33 Highway
Address 2: PO BOX 128
City: Wellsville State: KS Zip: 66092 + _____
Contact Person: Phil Frick
Phone: (785) 883-4057
CONTRACTOR: License # 8509
Name: Evans Energy Development, Inc.
Wellsite Geologist: None
Purchaser: Kelly L. Maclaskey Oilfield Services, Inc.

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KCC WICHITA

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- 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 ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

6/30/2010	7/2/2010	7/2/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 031-22644-0000
Spot Description: _____
SW NW SE SW Sec. 14 Twp. 22 S. R. 16 East West
825 Feet from North / South Line of Section
3,795 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Coffey
Lease Name: Marjorie Crotts Well #: 2
Field Name: Wildcat
Producing Formation: Squirrel
Elevation: Ground: 1037 est Kelly Bushing: NA
Total Depth: 1080.0' Plug Back Total Depth: 1038.0'
Amount of Surface Pipe Set and Cemented at: 61.0 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1068.0
feet depth to: surface w/ 1/2 125 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 #: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: [Signature]
Title: Associate Date: 8/13/10

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dlg Date: 8/26/10

Operator Name: Altavista Energy, Inc. Lease Name: Marjorie Crotts Well #: 2
 Sec. 14 Twp. 22 S. R. 16 East West County: Coffey

INSTRUCTIONS: Show important tops and base 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. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Squirrel 1012.5' +24.5 <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED AUG 23 2010 KCC WICHITA </div>
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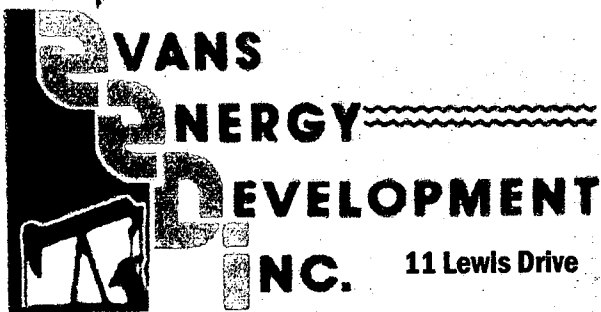
CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9 7/8"	7"	NA	61.0	50/50 Poz	36	See Service Ticket
Production	5 5/8"	2 7/8"	NA	1068.0	50/50 Poz	112	See Service Ticket

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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
3 spf	1012.5 to 1022.5 - 31 perfs - 2" DML RTG	Spot 75 gallons 15% HCL acid	1012.5-1022.5
		134 bbls City H2O	"
		300# 20/40 Brady Sand	"
		3700# 12/20 Brady Sand	"

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. 8/5/2010		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls. 3.0	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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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11 Lewis Drive

Paola, KS 66071

Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Altavista Energy, Inc.

Marjorie Crofts #2

API# 15-031-22,644

June 30 - July 2, 2010

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
35	soil & clay	35
4	gravel	39
3	clay	42
8	gravel	50
167	shale	217
53	lime	270
90	shale	360
14	lime	374
6	shale	380
4	lime	384
31	shale	415
21	lime	436
3	shale	439
9	lime	448
24	shale	472
13	lime	485
6	shale	491
4	lime	495
42	shale	537
38	lime	575
21	shale	596
56	lime	652 base of the Kansas City
152	shale	804
19	lime	823
4	shale	827
9	lime	836
27	shale	863
6	lime	869
10	shale	879
3	lime	882
8	shale	890
15	lime	905
5	shale	910
4	lime	914
24	shale	938
39	lime	977
35	shale	1012
1	lime & shells	1013

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1	shale	1014
2	oil sand	1016
1	lime sand	1017
5	oil sand	1022
1	broken sand	1023
11	silty shale	1034
46	shale	1080

Drilled a 9 7/8" hole to 61'
Drilled a 5 5/8" hole to 1080'
Cored From 1014-1034'

Set 61' of 7" surface casing with 15 sacks gel, cemented by Consolidated Oil Services.

Set 1068' of 2 7/8" 8 round upset tubing threaded and coupled with 3 centralizers, 1 float shoe, 1 clamp, 1 seating nipple, and 1 baffle.

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	<u>Core Times</u>	
	<u>Minutes</u>	<u>Second</u>
1014		33
1015		22
1016		32
1017		28
1018		25
1019		25
1020		27
1021		28
1022		29
1023		26
1024		27
1025		26
1026		29
1027		28
1028		28
1029		27
1030		26
1031		28
1032		30
1033		30

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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 235037

Invoice Date: 06/30/2010 Terms: 0/30,n/30

Page 1

ALTAVISTA ENERGY INC
4595 K-33 HIGHWAY
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

CROTTS 2
26958
SW 14-22-16 CF
06/30/2010
KS

Part Number	Description	Qty	Unit Price	Total
1110A	KOL SEAL (50# BAG)	200.00	.4000	80.00
1111	GRANULATED SALT (50 #)	77.00	.3200	24.64
1118B	PREMIUM GEL / BENTONITE	67.00	.2000	13.40
1124	50/50 POZ CEMENT MIX	36.00	9.5500	343.80

Description	Hours	Unit Price	Total
368 CEMENT PUMP (SURFACE)	1.00	700.00	700.00
368 EQUIPMENT MILEAGE (ONE WAY)	.00	3.55	.00
368 CASING FOOTAGE	61.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	96.00	192.00
548 TON MILEAGE DELIVERY	75.60	1.20	90.72

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Parts:	461.84	Freight:	.00	Tax:	24.48	AR	1469.04
Labor:	.00	Misc:	.00	Total:	1469.04		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 26958
LOCATION Ottawa
FOREMAN Alan Mader

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-30-10	3244	Crooks #2	SW 14	22	16	RT
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Alta Vista			516	Alan M	Safety	Monty
MAILING ADDRESS			368	Ken M	KA	
P.O. Box 128			370	Derek M		
CITY	STATE	ZIP CODE	578	Cecil P	CH8	
Wellsville	KS	66422				

JOB TYPE sur. HOLE SIZE 9 1/2 HOLE DEPTH 61 CASING SIZE & WEIGHT 7
 CASING DEPTH 61 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 46ppm

REMARKS: held crew meeting. Established ratio.
Mixed + pumped 40 sx 50 RD pop, 5# Kpl-seal, 5#
gal, 290 gal. Circulated cement. Displaced casing
with clean water. closed valve.

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54025	1	PUMP CHARGE		700.00
5406		MILEAGE		-
5402	61	casing footage		-
5407A	75.6	ton miles		90.72
5302L	2	80 vert		192.00
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1110A	200 #	Kal-seal		80.00
141	77 #	seal		24.64
1118B	67 #	gel		18.40
1124	360K	50/50 pop		343.80
WD # 235037				
			5.8%	SALES TAX
				ESTIMATED
				TOTAL
				24.48
				1489.04

Revin 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.



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 235174

Invoice Date: 07/13/2010 Terms: 0/30,n/30

Page 1

ALTAVISTA ENERGY INC
4595 K-33 HIGHWAY
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

CROTTS 2
26928
SW 14-22-16 CF
07/02/2010
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	112.00	9.8400	1102.08
1118B	PREMIUM GEL / BENTONITE	210.00	.2000	42.00
1111	GRANULATED SALT (50 #)	263.00	.3300	86.79
1110A	KOL SEAL (50# BAG)	625.00	.4200	262.50
4402	2 1/2" RUBBER PLUG	1.00	23.0000	23.00
1143	SILT SUSPENDER SS-630,ES	.50	38.5000	19.25
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	925.00	925.00
368 EQUIPMENT MILEAGE (ONE WAY)	45.00	3.65	164.25
436 80 BBL VACUUM TRUCK (CEMENT)	3.00	100.00	300.00
503 TON MILEAGE DELIVERY	236.25	1.20	283.50

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Parts:	1559.25	Freight:	.00	Tax:	98.24	AR	3330.24
Labor:	.00	Misc:	.00	Total:	3330.24		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 26928
LOCATION Ottawa, KS
FOREMAN Casey Kennedy

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/2/10	3244	Margerie Cotts #2	14	D2	16	CF
CUSTOMER Alta Vista						
MAILING ADDRESS PO. Box 128						
CITY Wellsville		STATE KS	ZIP CODE 66692			
		TRUCK #	DRIVER	TRUCK #	DRIVER	
		389	Gas Ken			
		368	Ken Ham	RH		
		503	Cec Par	CHP.		
		436	Ed Stei	ES	Eureka	

JOB TYPE logstring HOLE SIZE 5 5/8" HOLE DEPTH 1073' CASING SIZE & WEIGHT 2 7/8"
CASING DEPTH 1067' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" rubber plug
DISPLACEMENT 6.2 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS: Held safety meeting, established circulation, mixed + pumped 1/2 gal ESA-41, mixed + pumped 1/2 gal HE-100 Polymer, circulated for 1 hr to condition hole, mixed + pumped 125 sks 50/50 Permix w/ S&T Kol Seal, 5% Salt, + 2% Premium Gel per sk, cement to surface, flushed pump clean, displaced 2 1/2" rubber plug to TD w/ 6.2 bbls fresh water, released pressure to set float, secured to 700 PSI, released pressure to set float, shut in casing.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE current pump		925.00
5406	45 miles	MILEAGE pump truck		164.25
5407A	5.25 236.25	ton mileage		283.50
5502C	3 hrs	800 BCL Vac Truck		300.00

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1124	112 sks	50/50 Permix cement		1102.08
1118B	210 #	Premium Gel	AUG 2010	42.00
1111	263 #	Salt		86.79
1110A	625 #	Kol Seal	KCC WICHITA	262.50
4402	1	2 1/2" rubber plug		23.00
1143	1/2 gal	ESA-41		19.25
1401	1/2 gal	HE-100 Polymer		23.63
			Sub total	3232.00
			WO # 235174	
			SALES TAX	98.24
			ESTIMATED TOTAL	3330.24

Ravin 3737

AUTHORIZATION no CO. Rep. on location 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.