

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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Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
 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 #: _____

<u>9/15/2010</u>	<u>9/20/2010</u>	<u>9/20/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 031-22671-0000
Spot Description: _____
NW SW SE SW Sec. 14 Twp. 22 S. R. 16 East West
495 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 #: I-1
Field Name: Wildcat
Producing Formation: Squirrel
Elevation: Ground: 1040 est Kelly Bushing: NA
Total Depth: 1098.0 Plug Back Total Depth: 1056.0
Amount of Surface Pipe Set and Cemented at: 42.9 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1087.0
feet depth to: surface w/ 126 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.

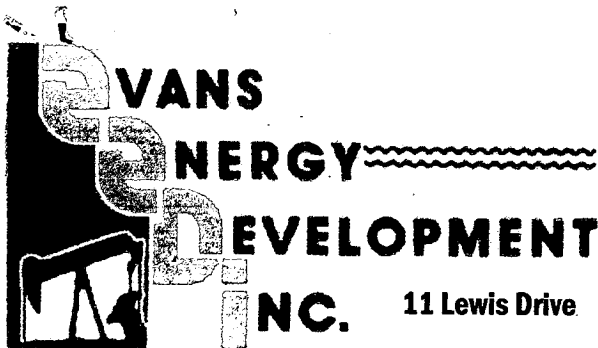
AFFIDAVIT

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: 10/25/10

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: DG Date: 11/5/10



**VANS
ENERGY
DEVELOPMENT
INC.**

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 #1-1

API # 15-031-22,671

September 15 - September 20, 2010

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
20	soil & clay	20
17	gravel	37
172	shale	209
54	lime	263
91	shale	354
14	lime	368
8	shale	376
4	lime	380
26	shale	406
64	lime	470
66	shale	536
59	lime	595
5	shale	600
15	lime	615
10	shale	625
13	lime	638
3	shale	641
8	lime	649 base of the Kansas City
149	shale	798
6	lime	804
14	shale	818
8	lime	826
7	shale	833
3	lime	836
46	shale	882
10	lime	892
9	shale	901
13	lime	914
7	shale	921
12	lime	933
22	shale	955
2	lime	957
10	shale	967
4	lime	971
31	shale	1002
2	lime	1004
3	shale	1007
5	oil sand	1012

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Marjorie Crofts #1-1

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5
7
74

broken sand
silty shale
shale

1017
1024
1098 TD

Drilled a 9 7/8" hole to 42.9'
Drilled a 5 5/8" hole to 1098'.

Set 42.9' of 7" surface casing with 10 sacks of gel, cemented by Consolidated Oil Services.

Set 1087' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe, and 1 clamp.

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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 # 236593

Invoice Date: 09/15/2010 Terms: 0/30,n/30

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

CROTTS I-1
27164
SW 14-22-16 CF
09/13/2010
KS

Part Number	Description	Qty	Unit Price	Total
1102	CALCIUM CHLORIDE (50#)	24.00	.7500	18.00
1118B	PREMIUM GEL / BENTONITE	47.00	.2000	9.40
1104S	CLASS "A" CEMENT (SALE)	24.00	13.5000	324.00

Description	Hours	Unit Price	Total
369 80 BBL VACUUM TRUCK (CEMENT)	3.00	100.00	300.00
495 CEMENT PUMP (SURFACE)	1.00	725.00	725.00
495 EQUIPMENT MILEAGE (ONE WAY)	3.00	3.65	10.95
495 CASING FOOTAGE	42.00	.00	.00
503 MIN. BULK DELIVERY	1.00	315.00	315.00

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Parts:	351.40	Freight:	.00	Tax:	22.13	AR	1724.48
Labor:	.00	Misc:	.00	Total:	1724.48		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 27164
LOCATION Ottawa
FOREMAN Alan Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-13-10	3244	Crotts F-1	SW 14	19N22	22W16	CF
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Altavista			516	Alan M	Safety Meeting	
MAILING ADDRESS			495	Casey K	CF	
P.O. Box 128			369	Harold	NSB	
CITY	STATE	ZIP CODE	303	Cecil	CF	
Wellsville	KS	66092				

JOB TYPE surf HOLE SIZE 9 1/2 HOLE DEPTH 43 CASING SIZE & WEIGHT 7
 CASING DEPTH 43 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 1 3/4 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 bpm

REMARKS: held crew meeting. Established rate. Mixed & pumped 25 sk Portland A, 2% case, 1% calcium circulated cement. Displaced casing with clean water. Closed valve.

Evans Energy

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE		725.00
5406	3	MILEAGE		10.75
5402	43	casing footage		
5407	min	ten miles		315.00
5502C	3	80 gal		300.00
1102	24 #	calcium		18.00
1118B	47 #	gal		9.40
1124S	24 sk	Portland "A"		324.00
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		W/O # 236593	OCT 29 2010	
			KCC WICHITA	
			SALES TAX	22.13
			ESTIMATED TOTAL	1724.48

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AUTHORIZATION [Signature]

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 # 236683

Invoice Date: 09/21/2010 Terms: 0/30,n/30

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

CROTTS I-1
27148
SW 14-22-16 CF
09/20/2010

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	126.00	9.8400	1239.84
1118B	PREMIUM GEL / BENTONITE	235.00	.2000	47.00
1111	GRANULATED SALT (50 #)	294.00	.3300	97.02
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
1110A	KOL SEAL (50# BAG)	700.00	.4200	294.00

Description	Hours	Unit Price	Total
369 80 BBL VACUUM TRUCK (CEMENT)	2.50	100.00	250.00
495 CEMENT PUMP	1.00	925.00	925.00
495 EQUIPMENT MILEAGE (ONE WAY)	45.00	3.65	164.25
495 CASING FOOTAGE	1067.00	.00	.00
510 TON MILEAGE DELIVERY	264.60	1.20	317.52

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Parts:	1743.74	Freight:	.00	Tax:	109.85	AR	3510.36
Labor:	.00	Misc:	.00	Total:	3510.36		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27148

LOCATION Ottawa KS

FOREMAN Fred 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
9/20/10	3244	Crofts # I-1	SW 14	22	16	CF
CUSTOMER Alta Vista			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 128			506	Fred	Safety	Wdy
CITY Wellsville			495	Harold	HOB	
STATE KS			369	Casey	CK	
ZIP CODE 66092			510	Cecil	CHP	

JOB TYPE Logging HOLE SIZE 5 7/8 HOLE DEPTH 1098 CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 1067' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 6.2 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Establish circulation. Mix + Pump 1/2 Gal FSA-41 + 1/2 Gal
 HE-100 Polymer Flush. Circulate from pit to condition hole
 Mix + Pump 140 sks 50/50 Por Mix Cement 2% Gal 5% Salt
 5# Kol Seal per sack. Cement to surface. Flush pump +
 lines clean. Displace 2 1/2" Rubber Plug to casing TD w/
 6.2 BBLs Fresh water. Pressure to 750# PSI. Release
 pressure to set float valve. Shut in casing.

Evans Energy Dev. Inc.

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925 ⁰⁰
5406	45 mi	MILEAGE		164 ²⁵
5402	1067'	Casing footage		N/C
5407A	264.6	Ton Miles		317 ⁵²
5502C	2 1/2 hrs	80 BBL Vac Truck		250 ⁰⁰
1124	126 sks	50/50 Por Mix Cement		1239 ⁸⁴
1118B	235 ^{##}	Premium Gal		47 ⁰⁰
1111	294 ^{##}	Granulated Salt		97 ⁰²
1110A	700 ^{##}	Kol Seal		294 ⁰⁰
4402	1	2 1/2" Rubber Plug		23 ⁰⁰
1143	1/2 Gal	FSA-41		19 ²⁵
1401	1/2 Gal	HE-100 Polymer		23 ⁶³
		NO 236683		
		6.3%	SALES TAX	109 ⁸⁵
			ESTIMATED TOTAL	3510 ²⁶

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AUTHORIZATION [Signature] 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.