

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

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.

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover
_____ Oil _____ SWD _____ SIOW
_____ Gas _____ ENHR _____ SIGW
_____ CM (Coal Bed Methane) _____ Temp. Abd.
_____ Dry Other WSW
(Core, WSW, Expl., Cathodic, 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
_____ Plug Back: _____ Plug Back Total Depth
_____ Commingled Docket No.: _____
_____ Dual Completion Docket No.: _____
_____ Other (SWD or Enhr.?) Docket No.: _____
8/30/10 8/31/10 8/31/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 031-22733-0000
Spot Description: _____
SE SE SW SW Sec. 14 Twp. 22 S. R. 16 East West
200 Feet from North / South Line of Section
4160 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Coffey
Lease Name: Sauder Well #: WSW-1
Field Name: Wildcat
Producing Formation: Kansas City
Elevation: Ground: 1037 est Kelly Bushing: NA
Total Depth: 720' Plug Back Total Depth: 703.0'
Amount of Surface Pipe Set and Cemented at: 57.7' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 703.0'
feet depth to: Surface w/ 79 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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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.

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: 12/7/10
Subscribed and sworn to before me this 7th day of DECEMBER,
20 10.

Notary Public: Stacy J. Thyer
Date Commission Expires: 3-31-2011

NOTARY PUBLIC
STATE OF KANSAS
STACY J. THYER
My Appt. Exp. 3-31-2011

KCC Office Use ONLY
N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
_____ Geologist Report Received
 UIC Distribution
Alt 2 - Dig - 12/17/10

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Operator Name: Altavista Energy, Inc. Lease Name: Sauder Well #: WSW-1
 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 copy of all Electric Wireline 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	12 1/4"	8 5/8"	NA	57.7'	50/50 POZ	44	See Service Co. Ticket
Production	6 3/4"	4 1/2"	NA	703.0'	50/50 POZ	79	See Service Co. Ticket

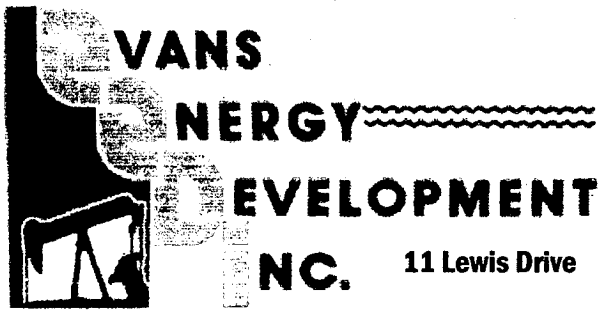
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2 spf	445.0 to 466.0 - 42 perfs - 3 3/8" DP 23 Gr. T. ECG		
		RECEIVED DEC 13 2010 KCC WICHITA	

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 12/3/10	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. NA Gas Mcf NA 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 <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.

Sauder #WSW-1

API # 15-031-22,733

August 30 - August 31, 2010

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
38	soil & clay	38
8	gravel	46
173	shale	219
57	lime	276
91	shale	367
10	lime	377
38	shale	415
22	lime	437
3	shale	440
18	lime	458
2	shale	460
18	lime	478
12	shale	490
4	lime	494
29	shale	523
2	lime	525
11	shale	536
16	lime	552
2	shale	554
41	lime	595
15	shale	610
41	lime	651 base of the Kansas City
69	shale	720 TD

Drilled a 12 1/4" hole to 57.7'.

Drilled a 6 3/4" hole to 720'

Set 57.7' of 8 5/8" surface casing with 10 sacks of gel cemented by Consolidated Oil Services.

Set 703' of 4 1/2" threaded and coupled tubing with 3 centralizers, 1 clamp and float shoe.

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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 # 236340

Invoice Date: 08/31/2010 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

SAUDER WSW 1
27132
SW 14-22-16 CF
08/30/2010

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	44.00	9.8400	432.96
1118B	PREMIUM GEL / BENTONITE	76.00	.2000	15.20

Description	Hours	Unit Price	Total
368 CEMENT PUMP (SURFACE)	1.00	725.00	725.00
368 EQUIPMENT MILEAGE (ONE WAY)	.00	3.65	.00
368 CASING FOOTAGE	57.00	.00	.00
368 EQUIPMENT STAND-BY ON LOCATION	1.00	80.00	80.00
370 80 BBL VACUUM TRUCK (CEMENT)	3.00	100.00	300.00
506 EQUIPMENT STAND-BY ON LOCATION	1.00	80.00	80.00
548 MIN. BULK DELIVERY	.50	315.00	157.50
548 EQUIPMENT STAND-BY ON LOCATION	1.00	80.00	80.00

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Parts:	448.16	Freight:	.00	Tax:	28.24	AR	1898.90
Labor:	.00	Misc:	.00	Total:	1898.90		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



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 # 236344

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Invoice Date: 08/31/2010 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

SAUDER WSW 1
27070
SW 14-22-16 CF
08/31/2010

Part Number	Description	Qty	Unit Price	Total
1110A	KOL SEAL (50# BAG)	440.00	.4200	184.80
1111	GRANULATED SALT (50 #)	170.00	.3300	56.10
1118B	PREMIUM GEL / BENTONITE	148.00	.2000	29.60
1124	50/50 POZ CEMENT MIX	79.00	9.8400	777.36
1143	SILT SUSPENDER SS-630,ES	.50	38.5000	19.25
1401	HE 100 POLYMER	.50	47.2500	23.63
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	925.00	925.00
368 EQUIPMENT MILEAGE (ONE WAY)	.00	3.65	.00
368 CASING FOOTAGE	703.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	4.00	100.00	400.00
548 MIN. BULK DELIVERY	1.00	315.00	315.00

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KCC WICHITA

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Parts: 1135.74 Freight: .00 Tax: 71.54 AR 2847.28
Labor: .00 Misc: .00 Total: 2847.28
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27070
LOCATION Ottawa
FOREMAN _____

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
8-31-10	324D	Sander WSW-1	SW 14	22	16	CF
CUSTOMER <u>Atavista</u>			TRUCK #			
MAILING ADDRESS <u>Box 128</u>			DRIVER			
CITY <u>Wellsville</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>66092</u>			TRUCK #			
			DRIVER			

JOB TYPE long string HOLE SIZE 6 3/4 HOLE DEPTH 720 CASING SIZE & WEIGHT 4 1/2
CASING DEPTH 723 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT 11 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Hold crew meeting. Established rate. Mixed & pumped 1/2 gal ESA 41 + 1/2 gal polymer. Circulated in to clean pit for 1 hr. Mixed & pumped 5 bbl dye marker followed by 88 sk 50/50 102 5# Kol-seal 590 salt 270 gel. Circulated dye. Flushed pump. Pumped plug to casing ID. Checked depth with wireline. Well held 800 PSI. Set float.

Evans Energy

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		92.5
5402		MILEAGE		
5402	703	casing footage		315.00
5407	min	ton miles		400.00
5502C	4	80 vac		
110A	440 #	Kol seal		184.80
111	170 #	salt		56.10
118B	148 #	gel		29.60
1124	79 sk	50/50 102	RECEIVED	777.36
1143	1/2	ESA 41	DEC 13 2010	19.25
1401	1/2	polymer		23.63
4404	1	1/2 plug	KCC WICHITA	45.00
		WO # 236344		
			SALES TAX	76.54
			ESTIMATED TOTAL	2847.28

Ravin 3737

[Signature]

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.