

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: Coffeyville Resources

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>2/7/2011</u>	<u>2/8/2011</u>	<u>2/8/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 031-22810-0000

Spot Description: _____

NW SW NE SW Sec. 14 Twp. 22 S. R. 16 East West

1,835 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 Crofts Well #: I-9A

Field Name: Wildcat

Producing Formation: Squirrel

Elevation: Ground: 1035 est Kelly Bushing: NA

Total Depth: 1118.0 Plug Back Total Depth: 1067.6

Amount of Surface Pipe Set and Cemented at: 46.3 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 1099.96

feet depth to: surface w/ 140 sx crnt.

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: Phil Frick

Title: Associate Date: 3/23/2011

KCC Office Use ONLY

Letter of Confidentiality Received

Date: MAR 28 2011

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: DG Date: 3/29/11

RECEIVED

KCC WICHITA

Operator Name: Altavista Energy, Inc. Lease Name: Marjorie Crotts Well #: I-9A
 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 type="checkbox"/> Yes <input checked="" 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 <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Squirrel</td> <td>1016.5</td> <td>+18.5 est</td> </tr> </table>	Name	Top	Datum	Squirrel	1016.5	+18.5 est
Name	Top	Datum					
Squirrel	1016.5	+18.5 est					

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	46.3	50/50 Poz	30	See Service Ticket
Production	5 5/8"	2 7/8"	NA	1099.96	50/50 Poz	140	See Service Ticket

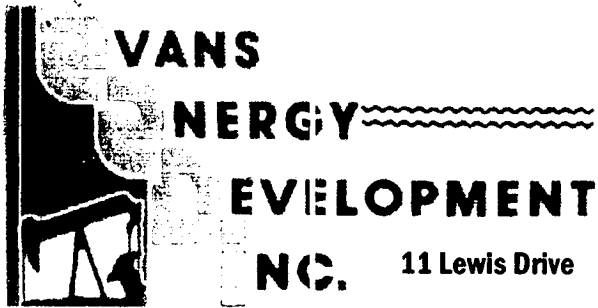
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
3 spf	1016.5 to 1026.5 - 31 perfs - 2" DML RTG		

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. Pending Permit	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____				
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 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: _____ _____
---	--	--



**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

INC. 11 Lewis Drive Paola, KS 66071

**Phone: 913-557-9083
Fax: 913-557-9084**

WELL LOG

Altavista Energy, Inc.
Marjorie Crotts #1-9A
API#15-031-22,810

February 7, 2011 - February 8, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
36	soil & clay	36
5	gravel	41
2	clay	43
182	shale	225
41	lime	266 water
101	shale	367
6	lime	373
11	shale	384
2	lime	386
39	shale	425
7	lime	432
10	shale	442
11	lime	453
27	shale	480
10	lime	490
42	shale	532
2	lime	534
9	shale	543
19	lime	562
25	shale	587
18	lime	605
6	shale	611
19	lime	630
9	shale	639
11	lime	650
160	shale	810
16	lime	826
6	shale	832
10	lime	842
38	shale	880
4	lime	884
41	shale	925
8	lime	933
13	shale	946
5	lime	951
21	shale	972
7	lime	979

RECEIVED

MAR 28 2011

KCC WICHITA

36	shale	1015
1	lime & shells	1016
3	shale	1019
2	broken sand	1021
4	oil sand	1025
2	broken sand	1027
7	silty shale	1034
84	shale	1118 TD

Drilled a 9 7/8" hole to 46.3'

Drilled a 5 5/8" hole to 1118'

Set 46.3' of 7" surface casing cemented with 10 sacks gel, cemented by Consolidated Oil Service

Set 1099.96' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp, and 1 baffle.

RECEIVED
MAR 28 2011
KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 27367
LOCATION Attoawa KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2/7/11	3244	M. Croyle # I-9A	SW 14	22	16	CF
CUSTOMER Alta Vista Energy			TRUCK #			
MAILING ADDRESS P.O. Box 128			DRIVER		TRUCK #	
CITY Wellsville			DRIVER		TRUCK #	
STATE KS			DRIVER		TRUCK #	
ZIP CODE			DRIVER		TRUCK #	
			DRIVER		TRUCK #	
			DRIVER		TRUCK #	
			DRIVER		TRUCK #	

JOB TYPE Surface HOLE SIZE 9 1/2 HOLE DEPTH 44' CASING SIZE & WEIGHT 7"
 CASING DEPTH 44' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 10'
 DISPLACEMENT 1.75 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.13 PM

REMARKS: Establish circulation thru 7" casing - Mix + Pump 30 s/s
 50/50 Poz Mix Cement 2% Gel 5% Salt 5# Kol Seal per sack.
 Cement to surface. Displace 7" clean w/ 1.75 BBL Fresh
 water. Shut in casing.

Evans Energy Dev. Inc. *Fred Mader*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE Surface		775 ⁰⁰
5406	-0-	MILEAGE Truck on lease		NIC
5402	44	Casing Footage		NIC
5407A	62.78	100 Miles		79 ¹⁰
5501C	2 hrs	Trans port		224 ⁰⁰
1124	30 s/s	50/50 Poz Mix Cement		313 ⁵⁰
1118B	51 #	Premium Gel		102 ⁰⁰
1111	58 #	Granulated Salt		20 ³⁰
110A	150 #	Kol Seal		66 ⁰⁰
		WD # 239497	RECEIVED	
			MAR 28 2011	
			KCC WICHITA	
		6.3%	SALES TAX	25 ⁸³
			ESTIMATED	
			TOTAL	1513 ⁹³

Revin 3737

AUTHORIZATION *Harry Ferri* 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

TICKET NUMBER 27093

LOCATION Ottawa KS

FOREMAN Cathy 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
2/11/11	3244	M. Crofts # I-9A	sw 14	22	16	CF
CUSTOMER <u>Atavista Energy</u>			TRUCK #			
MAILING ADDRESS <u>PO Box 128</u>			DRIVER			
CITY <u>Wellsville</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>666092</u>			TRUCK #			
			DRIVER			

JOB TYPE log string HOLE SIZE 5 7/8" HOLE DEPTH 1103' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 1093' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" rubber plug
 DISPLACEMENT 6.35 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE 5.5 bpm

REMARKS: held safety meeting, established circulation, mixed + pumped 1/2 gal ESA-41 + 1/2 gal HE-100 polymer, ~~circulated~~ circulated out of pit to condition hole, mixed + pumped 140 sks 50/50 Pozmix cement w/ 2% Premium Gal, 5% Salt, + 5# Kol Seal per sk, cement to surface, flushed pump clear, displaced 2 1/2" rubber plug to casing TP w/ 6.35 bbl fresh water, pressured to 750 PSI, released pressure to set float valve, shut in casing.

(Evans Energy)

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE cement pump #495		975.00
5406	45 miles	MILEAGE pump truck 405		180.00
5402	1093'	casing footage		NC
5407A	292.95	ton mileage 510		369.12
5502C	2.5 hrs	80 bbl Vac Truck 437		225.00
1124	140 sks	50/50 Pozmix cement		1463.00
1118B	235 #	Premium Gal		47.00
1111	294 #	Salt		102.90
1110A	700 #	Kol Seal		308.00
4402	1	2 1/2 rubber plug		28.00
1143	1/2 gal	ESA-41		20.20
1401	1/2 gal	HE-100 Polymer		23.63
		WOT# 239559		
		KCC WICHITA		

RECEIVED
MAR 28 2011

KCC WICHITA

6.37% SALES TAX 125.53
ESTIMATED TOTAL 3867.38

Revin 3737

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.