

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 # 33715
Name: Town Oilfield Service
Wellsite Geologist: None
Purchaser: Coffeyville Resources

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 #: _____

| | | |
|-----------------------------------|-----------------|---|
| 4/28/2011 | 4/29/2011 | 4/29/2011 |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 121-28860-0000
Spot Description: _____
NW SE NE SW Sec. 10 Twp. 19 S. R. 24 East West
1,769 Feet from North / South Line of Section
3,128 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Miami
Lease Name: Middaugh Well #: AI-44
Field Name: Black
Producing Formation: Peru
Elevation: Ground: 833 est Kelly Bushing: NA
Total Depth: 198.0 Plug Back Total Depth: 174.0
Amount of Surface Pipe Set and Cemented at: 42.0 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 194.0
feet depth to: surface w/ 42 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: 5/19/2011

KCC Office Use ONLY RECEIVED
 Letter of Confidentiality Received
Date: JUN 02 2011
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: DG Date: 6/16/11
KCC WICHITA

Operator Name: Altavista Energy, Inc. Lease Name: Middaugh Well #: AI-44
 Sec. 10 Twp. 19 S. R. 24 East West County: Miami

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%;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Peru</td> <td>147.0'</td> <td>+686.0</td> </tr> </table> | Name | Top | Datum | Peru | 147.0' | +686.0 |
| Name | Top | Datum | | | | | |
| Peru | 147.0' | +686.0 | | | | | |

| 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 | 12.25" | 8.625" | NA | 42.0 | Portland | 5 | NA |
| Production | 6.75" | 4.5" | NA | 194.0 | 50/50 Poz | 42 | 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 | 147.0 to 154.0 - 21 perms - 3.375" DP 23 Gr. T. ECG | | |
| | | | |
| | | | |

| | | | |
|---|-----------------|---|-----------------------------------|
| 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 Bbbs. NA | Gas Mcf | Water Bbbs. Gas-Oil Ratio Gravity |

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|---|---|---|
| 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 JUN-02 2011 KCC WICHITA |
|---|---|---|

Middavigh Farm: Marina County
KS State: Well No. AJ-44

Elevation _____

Commenced Spuding 4-28 2011

Finished Drilling 4-29 2011

Driller's Name Wes Dolezal

Driller's Name Jeff Towner

Driller's Name _____

Tool Dresser's Name _____

Tool Dresser's Name _____

Tool Dresser's Name _____

Contractor's Name TCS
10 19 21

(Section) (Township) (Range)

Distance from S line, _____ ft.

Distance from E line, _____ ft.

2 hours
5 sacks

**CASING AND TUBING
 RECORD**

10" Set _____ 10" Pulled _____
 8" Set 42' 8" Pulled _____
 6 1/2" Set _____ 6 1/2" Pulled _____
 4" Set 194 4" Pulled _____
 2" Set _____ 2" Pulled _____

174 Baffle 198TD

CASING AND TUBING MEASUREMENTS

| Feet | In. | Feet | In. | Feet | In. |
|------|-----|------|-----|------|--------|
| 1 | 28 | 4 | | | |
| | 29 | 1 | | | |
| | 29 | - | | | |
| | 29 | 4 | | | |
| | 29 | - | | | |
| | 29 | 5 | 174 | 4 | Baffle |
| | 19 | 8 | 194 | 2 | Pipe |
| | | | 198 | TD | |
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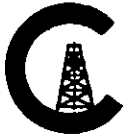
KCC WICHITA

| Thickness of Strata | Formation | Total Depth | Remarks |
|---------------------|-----------|-------------|-----------------------------------|
| 25 | Soil/Clay | 25 | |
| 87 | Shale | 112 | |
| 9 | red bed | 121 | |
| 7 | Shale | 128 | |
| 6 | red bed | 134 | |
| 15 | Shale | 149 | |
| Perf. 33 | Sand | 152 | Sand Oil, Little bleed, Turkey |
| 30 | Shale | 182 | |
| 6 | Lime | 188 | |
| 10 | Shale | 198 | TD |
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KCC WICHITA



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 # **241031**

Invoice Date: **04/30/2011** Terms: **0/0/30,n/30**

Page **1**

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

MIDDAUGH AI-44
31898
NW 10-19-24 MI
04/29/2011
KS

| Part Number | Description | Qty | Unit Price | Total |
|-------------|--------------------------|--------|------------|--------|
| 1124 | 50/50 POZ CEMENT MIX | 42.00 | 10.4500 | 438.90 |
| 1118B | PREMIUM GEL / BENTONITE | 71.00 | .2000 | 14.20 |
| 1111 | GRANULATED SALT (50 #) | 82.00 | .3500 | 28.70 |
| 1110A | KOL SEAL (50# BAG) | 210.00 | .4400 | 92.40 |
| 4404 | 4 1/2" RUBBER PLUG | 1.00 | 42.0000 | 42.00 |
| 1143 | SILT SUSPENDER SS-630,ES | .50 | 40.4000 | 20.20 |
| 1401 | HE 100 POLYMER | .50 | 47.2500 | 23.63 |

| Description | Hours | Unit Price | Total |
|----------------------------------|--------|------------|--------|
| 368 CEMENT PUMP | 1.00 | 975.00 | 975.00 |
| 368 EQUIPMENT MILEAGE (ONE WAY) | .00 | 4.00 | .00 |
| 368 CASING FOOTAGE | 194.00 | .00 | .00 |
| 370 80 BBL VACUUM TRUCK (CEMENT) | 2.50 | 90.00 | 225.00 |
| 503 MIN. BULK DELIVERY | .50 | 330.00 | 165.00 |

Parts: 660.03 Freight: .00 Tax: 49.84 AR 2074.87
 Labor: .00 Misc: .00 Total: 2074.87
 Sublt: .00 Supplies: .00 Change: .00

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Signed _____ Date **KCC WICHITA**



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 31898

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 |
|-----------------|------------|--------------------|---------|----------|--------|--------|
| 4/25/11 | 3244 | Middaugh # AI-44 | NW 10 | 19 | 24 | M1 |
| CUSTOMER | | | TRUCK # | | DRIVER | |
| MAILING ADDRESS | | | TRUCK # | | DRIVER | |
| CITY | | | TRUCK # | | DRIVER | |
| STATE | | | TRUCK # | | DRIVER | |
| ZIP CODE | | | TRUCK # | | DRIVER | |
| Wellsville | | | 506 | | Fred | |
| KS | | | 368 | | Ken | |
| 66092 | | | 370 | | Arlen | |
| | | | 503 | | Tim | |

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 198 CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 194' DRILL PIPE Baffle @ 174' OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 80'
 DISPLACEMENT 2.76 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish circulation. Mix & Pump 1/2 Gal ESA-41 & 1/2 Gal HE-100
Polymer. Circulate from pit to condition hole. Mix & Pump
42 sks 50/50 Por Mix Cement 2% Gal 5% Salt 5# Kol Seal
Per sack. Cement to surface. Flush pump & lines clean.
Displace 4 1/2" Rubber plug to Baffle w/ 2.76 BBLs Fresh water
Pressure to 600# PSI. Release pressure to set float valve
Shut in casing.

Tow Drilling

Fred Mader

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|------------|---------------------|
| 5401 | 1 | PUMP CHARGE | | 975 ⁰⁰ |
| 5406 | -0. | MLEAGE Trucks on lease | | N/C |
| 5402 | 194 | Casing footage | | N/C |
| 5407 | 1/2 Minimum | Ton Miles | | 165 ⁰⁰ |
| 5502C | 2 1/2 hrs | 80 BBL Vac Truck | | 225 ⁰⁰ |
| 1124 | 42 sks | 50/50 Por Mix Cement | | 438 ²⁰ |
| 1118B | 71 [#] | Premium Gal | | 14 ²⁰ |
| 1111 | 82 [#] | Granulated Salt | | 28 ⁷⁰ |
| 1110A | 210 [#] | Kol Seal | | 92 ⁴⁰ |
| 440R | 1 | 4 1/2" Rubber Plug | | 42 ⁰⁰ |
| 1143 | 1/2 Gal | ESA-41 | | 20 ²⁰ |
| 1401 | 1/2 Gal | H.E-100 Polymer | | 23 ⁶³ |
| | | | | RECEIVED |
| | | | | JUN 02 2011 |
| | | | | SALES TAX |
| | | | | ESTIMATED TOTAL |
| | | | | 2074. ⁸⁷ |

Rev 3797

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.