



KANSAS CORPORATION COMMISSION 1057482  
OIL & GAS CONSERVATION DIVISION

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: \_\_\_\_\_

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 #: \_\_\_\_\_  
05/06/2011    05/10/2011    05/10/2011  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-121-28849-00-00  
Spot Description: \_\_\_\_\_  
SE NW SE NW Sec. 10 Twp. 19 S. R. 24  East  West  
3520 Feet from  North /  South Line of Section  
3400 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-33  
Field Name: Black  
Producing Formation: Peru  
Elevation: Ground: 836 Kelly Bushing: 836  
Total Depth: 178 Plug Back Total Depth: 145  
Amount of Surface Pipe Set and Cemented at: 45 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 174  
feet depth to: 0 w/ 40 sx cmt.

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content: 0 ppm Fluid volume: 20 bbls  
Dewatering method used: Evaporated  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

Submitted Electronically

**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: Deanna Gattico Date: 06/17/2011



1057482

Operator Name: Altavista Energy, Inc. Lease Name: Middaugh Well #: AI-33  
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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Peru	108	+728
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				
Gamma Ray/Neutron/CCL				

CASING RECORD <input checked="" 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	20	45	Portland	4	
Production	6.75	4.5	10	174	50/50 Poz	40	

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	51 Perfs - 108-124 - 3.375 DP 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.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Thickness of Strata	Formation	Total Depth	Remarks
22	Soil clay	22	
66	Shale	88	
8	red bed	96	
8	Shale	104	
3	Sandy shale	107	
1	Sand	108	no oil
2	sand	110	50% oil
5	sand	115	solid oil
3	sand	118	50% oil
3	sand	121	solid oil
3	sand	124	50% oil
2	sandy shale	126	no oil
35	Shale	161	
4	Lime	165	
13	Shale	178	TD



**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 • 1-800/467-8876  
FAX 620/431-0012

INVOICE

Invoice # 241290

Invoice Date: 05/13/2011 Terms: 0/0/30,n/30

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

MIDDAUGH AI-33  
31927  
NW 10-19-24 MI  
05/10/2011  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	40.00	10.4500	418.00
1118B	PREMIUM GEL / BENTONITE	68.00	.2000	13.60
1111	GRANULATED SALT (50 #)	78.00	.3500	27.30
1110A	KOL SEAL (50# BAG)	200.00	.4400	88.00
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
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
495 CEMENT PUMP	1.00	975.00	975.00
495 EQUIPMENT MILEAGE (ONE WAY)	50.00	4.00	200.00
495 CASING FOOTAGE	168.00	.00	.00
503 TON MILEAGE DELIVERY	93.00	1.26	117.18

Parts: 632.73 Freight: .00 Tax: 47.77 AR 2152.68  
 Labor: .00 Misc: .00 Total: 2152.68  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7864

GILLETTE, WY  
307/686-4914

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

WORLD, WY  
307/347-4577



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 31927

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
5/10/11	3244	Midlaugh # AI-33	NW 10	19	24	MI
CUSTOMER			TRUCK #			
Alta Vista Energy			DRIVER			
MAILING ADDRESS			TRUCK #			
P.O. Box 128			DRIVER			
CITY			TRUCK #			
Wellsville			DRIVER			
STATE			TRUCK #			
KS			DRIVER			
ZIP CODE			TRUCK #			
66092			DRIVER			

JOB TYPE Long string HOLE SIZE 6 3/4" HOLE DEPTH 198 CASING SIZE & WEIGHT 4 1/2"  
 CASING DEPTH 110' DRILL PIPE 2 1/2" @ TUBING 1 1/2" OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 4 1/2" Plug  
 DISPLACEMENT 2.35 BB DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 BPM

REMARKS: Establish circulation. Mix & Pump 1/2 Gal ESA-41 + 1/2 Gal HE-100 Polymer. Flush. Circulate from pit to condition hole. Mix & Pump 10/sks 50/50 for mix cement w/2% Gel 5% Salt 5# Kol Seal/sk. Cement to surface. Flush pump + lines clean. Displace 4 1/2" Rubber plug to casing TD w/ 2.35 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		925 <sup>00</sup>
5406	50 mi	MILEAGE		200 <sup>00</sup>
5402	16 ft	Casing footage		N/C
5407A	93	Ton Miles		117.15
5500C	2 hrs	60 BBL Vac Truck		180 <sup>00</sup>
1124	40 SKS	50/50 for Mix Cement		418 <sup>00</sup>
1118B	65 <sup>00</sup>	Premium Gel		13 <sup>60</sup>
1111	75 <sup>00</sup>	Granulated Salt		273 <sup>00</sup>
1110A	200 <sup>00</sup>	Kol Seal		88 <sup>00</sup>
4404	1	4 1/2" Rubber Plug		42 <sup>00</sup>
1143	1/2 Gal	ESA-41		20 <sup>00</sup>
1401	1/2 Gal	HE-100 Polymer		23 <sup>63</sup>
		WD # 241290		
		7.55%	SALES TAX	47.27
			ESTIMATED TOTAL	2152 <sup>63</sup>

Rev'n 3737

AUTHORIZATION Dennis 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.