



KANSAS CORPORATION COMMISSION 1060643
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 # 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>06/07/2011</u>	<u>06/09/2011</u>	<u>06/09/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-045-21727-00-00

Spot Description: _____
SE NE NE NW Sec. 1 Twp. 15 S. R. 20 East West
4785 Feet from North / South Line of Section
2805 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Douglas

Lease Name: Jim Bell Well #: A-4

Field Name: _____

Producing Formation: Squirrel

Elevation: Ground: 1054 Kelly Bushing: 1054

Total Depth: 1018 Plug Back Total Depth: 948

Amount of Surface Pipe Set and Cemented at: 40 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 980

feet depth to: 0 w/ 139 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 Gantsov Date: 08/08/2011



1060643

Operator Name: Altavista Energy, Inc. Lease Name: Jim Bell Well #: A-4
 Sec. 1 Twp. 15 S. R. 20 East West County: Douglas

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input 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>Bartlesville</td> <td>835</td> <td>+219</td> </tr> </table>	Name	Top	Datum	Bartlesville	835	+219
Name	Top	Datum					
Bartlesville	835	+219					

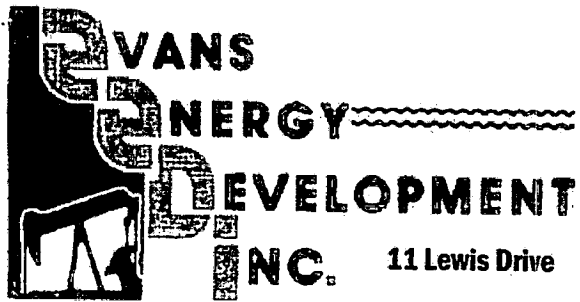
CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9.875	7	18	40	Portland	8	NA
Production	5.625	2.875	6	980	50/50 Poz	139	See Ticket

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD	-			
___ 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	835-855 - 62 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. <u>07/25/2011</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>2</u>	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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

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

11 Lewis Drive Paola, KS 66071

WELL LOG
Altavista Energy, Inc.
Jim Bell #A-4
API # 15-045-21,727
June 7 - June 9, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
14	soil & clay	14
2	lime	16
10	shale	26
4	lime	30
138	shale	168
5	lime	173
8	shale	181
11	lime	192
13	shale	205
3	lime	208
13	shale	221
23	lime	244
14	shale	258
18	lime	276
74	shale	350
27	lime	377
13	shale	390
4	lime	394
43	shale	437
4	lime	441
16	shale	457
28	lime	485
7	shale	492
21	lime	513
2	shale	515
11	lime	526 base of the Kansas City
174	shale	700
6	lime	706
5	shale	711
5	lime	716
8	shale	724
5	lime	729
30	shale	759
11	lime	770
20	shale	790
2	lime	792
3	shale	795

3	lime	798
2	shale	800
1	lime	801
3	shale	804
12	sand	816 lite brown, slight gas odor
1	silty shale	817
16	sand	833
2	broken sand	835
20	oil sand	855
44	shale	899
6	lime	905
6	grey sand	911 very few broken seams
1	broken sand	912
1	silty shale	913
1	broken sand	914
9	silty shale	923
2	broken sand	925
2	silty shale	927
5	shale	932
2	broken sand	934
3	shale	937
1	coal	938
61	shale	999
3	silty shale	1002
16	shale	1018 TD

Drilled a 9 7/8" hole to 40.4'

Drilled a 5 5/8" hole to 1018'

Set 40.4' of 7" surface casing cemented with 8 sacks of cement.

Set 980' of 2 7/8" threaded and coupled 8 round upset tubing including 3 centralizers, 1 float shoe, 1 baffel and 1 clamp.

	Core Times	
	<u>Minutes</u>	<u>Seconds</u>
800		25
801		25
802		27
803		27
804		29
805		25
806		25
807		27
808		28
809		47
810		21
811		17
812		19
813		20
814		20
815		22
816		30
817		37
818		40
819		30



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 # 242052

Invoice Date: 06/22/2011 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

J. BELL A-4
32596
NW 1-15-20 DG
06/09/2011
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	139.00	10.4500	1452.55
1118B	PREMIUM GEL / BENTONITE	234.00	.2000	46.80
1111	GRANULATED SALT (50 #)	269.00	.3500	94.15
1110A	KOL SEAL (50# BAG)	695.00	.4400	305.80
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
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)	2.50	90.00	225.00
495 CEMENT PUMP	1.00	975.00	975.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	4.00	100.00
495 CASING FOOTAGE	980.00	.00	.00
510 MIN. BULK DELIVERY	1.00	330.00	330.00

Parts: 1971.13 Freight: .00 Tax: 143.89 AR 3745.02
 Labor: .00 Misc: .00 Total: 3745.02
 Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 32596
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
6/9/11	3244	J. Bell # A-4	NW 1	15	20	DG
CUSTOMER Alka Vista Energy			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 128			506	Fred	Safety	Mtg
CITY Wellsville	STATE KS	ZIP CODE	495	Casey	CK	
			370	Arlen	ARM	
			510	Forest	CNP	

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 1020 CASING SIZE & WEIGHT 2 7/8 EUE
CASING DEPTH 9500 DRILL PIPE Baffle in TUBING @ 940' OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 30' + Plug
DISPLACEMENT 5.5 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Establish circulation Mix + Pump 1/2 Gal ESA-41 + 1/2 Gal HE
100 Polymer Flush. Circulate from p.9 to condition hole.
Mix + Pump 139 ~~139~~ sks 50/50 Poz Mix Cement 2% Gal 5% Salt
5# Kol Seal/sack. Cement to surface. Flush pump + lines
clean. Displace 2 1/2" Rubber plug to Baffle w/ 5.5 BBL Fresh
water. Pressure to 500* PSI. Release pressure to set Float
Value. Shut in casing.

Fred Mader

Evans Energy Dev. Inc. (Kany)

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975 ⁰⁰
5406	25 mi	MILEAGE		100 ⁰⁰
5402	950	Casing Footage		110
5407	Minimum	Ten Miles		330 ⁰⁰
5502C	2 1/2 hrs	80 Bbl Vac truck		225 ⁰⁰
1124	139 sks	50/50 Poz Mix Cement		1452 ⁵⁵
1118B	234#	Premium Gel.		46 ⁸⁰
1111	269#	Granulated Salt		94 ¹⁵
1110A	695#	Kol Seal		305 ⁸⁰
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 ⁶⁵
		WR # 242 052		
		7.3%	SALES TAX ESTIMATED TOTAL	143 ⁸⁹
				3745 ⁰²

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