



KANSAS CORPORATION COMMISSION 1060725  
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: 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 #: \_\_\_\_\_  
03/31/2011    04/01/2011    04/01/2011  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-121-28836-00-00  
Spot Description: \_\_\_\_\_  
NE SW SE NW Sec. 10 Twp. 19 S. R. 24  East  West  
3270 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 #: A-35  
Field Name: Black  
Producing Formation: Peru  
Elevation: Ground: 837 Kelly Bushing: 837  
Total Depth: 198 Plug Back Total Depth: 156  
Amount of Surface Pipe Set and Cemented at: 42 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 184  
feet depth to: 0 w/ 44 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 Gantzer Date: 08/03/2011



1060725

Operator Name: Altavista Energy, Inc. Lease Name: Middaugh Well #: A-35  
 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 Wireline Logs surveyed. Attach final geological well site report.

|   |   |       |     |       |      |     |      |
|---|---|-------|-----|-------|------|-----|------|
| Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><i>(If no, Submit Copy)</i><br><br>List All E. Logs Run:<br><br>Gamma Ray/Neutron/CCL | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br><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>Peru</td> <td>106</td> <td>+731</td> </tr> </table> | Name  | Top | Datum | Peru | 106 | +731 |
| Name  | Top   | Datum |     |       |      |     |      |
| Peru  | 106   | +731  |     |       |      |     |      |

| 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   | 12.25             | 8.625                     | 20                | 42            | Portland       | 3            | NA                         |
| Production  | 6.75              | 4.5                       | 10                | 184           | 50/50 Poz      | 44           | See Ticket                 |
|   |                   |                           |                   |               |                |              |                            |

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

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| 3              | 106-124 - 57 Perfs - 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.<br>06/03/2011 |                | Producing Method:<br><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.<br>2 | Gas Mcf  | Water Bbls. Gas-Oil Ratio Gravity |

|   |  |  |
|---|--|--|
| DISPOSITION OF GAS:<br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION:<br><input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i><br><input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL:<br>_____<br>_____ |
|---|--|--|





| Thickness of Strata       | Formation  | Total Depth | Remarks                  |
|---------------------------|------------|-------------|--------------------------|
| 0-26                      | Soil, Clay | 26          |                          |
| 65                        | Shale      | 91          |                          |
| 8                         | Red Bed    | 99          |                          |
| 3                         | Shale      | 102         |                          |
| 3                         | Red Bed    | 105         |                          |
| 2                         | Shale      | 107         |                          |
| 9                         | Sand       | 116         | Odor, little bleed, Gray |
| 7                         | Sand       | 123         | Brown, OK bleed          |
| 3                         | Sandy Lime | 126         | Gray, little to no show  |
| 2                         | Sand       | 128         | Little to no show        |
| 34                        | Shale      | 164         |                          |
| 3                         | Lime       | 167         |                          |
| 10                        | Shale      | 177         |                          |
| 5                         | Lime       | 182         |                          |
| 16                        | Shale      | 198         | TD                       |
| (Dong says 109-176 Perf.) |            |             |                          |



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 31822  
LOCATION Orleans KS  
FOREMAN Fred Mader

PO Box 884, Chanute, KS 66720  
820-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

| DATE                                       | CUSTOMER # | WELL NAME & NUMBER | SECTION                       | TOWNSHIP | RANGE | COUNTY |
|--|------------|--------------------|-------------------------------|----------|-------|--------|
| 4/1/11                                     | 3244       | Middaugh # A-35    | NW 10                         | 19       | 24    | Mi     |
| CUSTOMER<br>Alta Vista Energy              |            |                    | TRUCK # DRIVER TRUCK # DRIVER |          |       |        |
| MAILING ADDRESS<br>P.O. Box 128            |            |                    | 506 Fred Safety Mfg           |          |       |        |
| CITY STATE ZIP CODE<br>Wellsville KS 66092 |            |                    | 368 Ken KH                    |          |       |        |
|  |            |                    | 370 Arlen ABM                 |          |       |        |
|  |            |                    | 503 Derek DM                  |          |       |        |

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 198 CASING SIZE & WEIGHT 4 1/2  
CASING DEPTH 184 DRILL PIPE 1 5/8 - TUBING OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 4 1/2 Plug  
DISPLACEMENT 2.5 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 BPM

REMARKS: Establish circulation. Mix + Pump 100# Premium Gel  
Flush. Mix + Pump 44 sks 50/50 Poz Mix Cement w/ 2% Gel  
5% Salt 5# Kal Seal/sk. Cement to surface. Flush  
Pump + lines clean. Displace 4 1/2" Rubber plug to  
Bottle in casing w/ 2.5 BBL Fresh water. Pressure to  
250# PSL. Release pressure to set float valve.  
Shut in casing

TOWS Drilling

Fred Mader

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL                              |
|--------------|-------------------|------------------------------------|------------|------------------------------------|
| 5401         | 10#2              | PUMP CHARGE                        |            | 975 <sup>00</sup>                  |
| 5406         | 0                 | MILEAGE Trucks on lease            |            | N/C                                |
| 5402         | 184               | Casing footage                     |            | N/C                                |
| 5407         | 1/2-Minimum       | Ton Miles                          |            | 165 <sup>00</sup>                  |
| 5502C        | 2 hrs             | 80 BBL Vac Truck                   |            | 180 <sup>00</sup>                  |
| 1124         | 44 sks            | 50/50 Poz Mix Cement               |            | 459 <sup>80</sup>                  |
| 1115D        | 174#              | Premium Gel                        |            | 348 <sup>00</sup>                  |
| 111          | 85#               | Granulated Salt                    |            | 297 <sup>25</sup>                  |
| 1110A        | 220#              | Kal Seal                           |            | 96 <sup>00</sup>                   |
| 4404         | 1                 | 4 1/2" Rubber Plug                 |            | 42 <sup>00</sup>                   |
|              |                   | WD# 240343                         |            |                                    |
|              |                   |                                    | 7.55%      | SALES TAX 50 <sup>27</sup>         |
|              |                   |                                    |            | ESTIMATED TOTAL 2033 <sup>22</sup> |

Rev'n 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.