



KANSAS CORPORATION COMMISSION 1060726  
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 #: \_\_\_\_\_

<u>03/28/2011</u>	<u>04/01/2011</u>	<u>04/01/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-121-28837-00-00  
Spot Description: \_\_\_\_\_  
NW SW SE NW Sec. 10 Twp. 19 S. R. 24  East  West  
3020 Feet from  North /  South Line of Section  
3650 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-36  
Field Name: Black

Producing Formation: Peru  
Elevation: Ground: 839 Kelly Bushing: 839  
Total Depth: 198 Plug Back Total Depth: 158  
Amount of Surface Pipe Set and Cemented at: 43 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 186  
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 Gerrits Date: 08/03/2011



1060726

Operator Name: Altavista Energy, Inc. Lease Name: Middaugh Well #: A-36  
 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 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>Peru</td> <td>112</td> <td>+727</td> </tr> </table>	Name	Top	Datum	Peru	112	+727
Name	Top	Datum					
Peru	112	+727					

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	43	Portland	7	NA
Production	6.75	4.5	10	189	50/50 Poz	44	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 (Amount and Kind of Material Used)	Depth
3	112-130 - 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
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Date of First, Resumed Production, SWD or ENHR. <u>06/03/2011</u>	Producing Method: <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. <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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Mr. Ddough Farm: Miami County

KS State; Well No. A-56

Elevation \_\_\_\_\_

Commenced Spuding 3-26 20 11

Finished Drilling 4-1 20 11

Driller's Name Jeff Town

Driller's Name Stephen Scott

Driller's Name \_\_\_\_\_

Tool Dresser's Name \_\_\_\_\_

Tool Dresser's Name \_\_\_\_\_

Tool Dresser's Name \_\_\_\_\_

Contractor's Name TOS

10 19 24

(Section) (Township) (Range)

Distance from S line. \_\_\_\_\_ ft.

Distance from E line. \_\_\_\_\_ ft.

2 hours Sur.

7 Sacks

### CASING AND TUBING RECORD

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_

8" Set 43' 8" Pulled \_\_\_\_\_

6 1/2" Set \_\_\_\_\_ 6 1/2" Pulled \_\_\_\_\_

4" Set 188.5 4" Pulled \_\_\_\_\_

2" Set \_\_\_\_\_ 2" Pulled \_\_\_\_\_

158.8 Baffle 19.8 TD

### CASING AND TUBING MEASUREMENTS

Feet	in.	Feet	In.	Feet	In.
1	33	75			
2	32	75			
3	31	5			
4	31	2			
5	29	6			
6	29	7			
<del>188.5</del>					
	188.5	5	Pipe		
	29	7			
	158.8	8	Baffle		

Thickness of Strata	Formation	Total Depth	Remarks
25	Soil / Clay	25	
105	Shale	90	
5	Red Bed	95	
6	Shale	101	
3	Red Bed	104	
1	Shale	105	
1	Coal	100	
3	Shale	109	
2	Red Bed	111	
2	Shale	113	
17	Sand	130	oil, Limpid, 119-123 best
1	Lime	131	
1	Sandy Shale	132	Little oil
36	Shale	168	
3	Lime	171	
6	Shale	177	
11	Lime	188	
<del>5</del>	Shale	<del>193</del>	
5	Lime	198	<del>TD</del> TD



**CONSOLIDATED**  
OIL WELL SERVICES, LLC

TICKET NUMBER 31821  
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
4/1/11	3244	Middaugh # A-36	NW 10	19	24	Mi
CUSTOMER Alta Vista Energy			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 128			506 Fred Safety Mfg			
CITY STATE ZIP CODE Wellsville KS 66092			368 Ken KH			
			503 Davek DM			
			370 Arlen ARM			

JOB TYPE house strike HOLE SIZE 6 3/4 HOLE DEPTH 198 CASING SIZE & WEIGHT 4 1/2  
CASING DEPTH 1880 DRILL PIPE Baffle TUBING 159' 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 4BPM

REMARKS: Establish circulation. Mix + Pump 100# Premium Gcl  
Flush. Mix + Pump 44 sks 50/50 Por Mix Cement 270 Gcl  
5% Salt 5# Kol Seal/sk. Cement to surface. Flush pump  
+ lines clean. Displace 4 1/2" Rubber Plug to 1880. Baffle  
in casing w/ 2.5 BBL Fresh water. Pressure to 700# PSI  
Sh. Release pressure to set float valve. Shut in casing

TOWNS Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1 of 2	PUMP CHARGE		975 <sup>00</sup>
5406	50 mi	MILEAGE		200 <sup>00</sup>
5402	188	Casing footage		N/C
5407	1/2 minimum	Ton Miles		165 <sup>00</sup>
5502C	2 hrs	50 BBL Vac Truck		180 <sup>00</sup>
1124	44 sks	50/50 Por Mix Cement		459 <sup>80</sup>
1118B	174#	Premium Gcl		34 <sup>80</sup>
1111	85#	Granulated Salt		27 <sup>25</sup>
140A	220#	Kol Seal		96 <sup>80</sup>
4404	1	4 1/2" Rubber Plug		42 <sup>00</sup>
		<u>WD # 270342</u>		
			7.55	SALES TAX
				ESTIMATED
				TOTAL
				2233. <sup>22</sup>

Ravin 3737

Jim Hoch

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.