



KANSAS CORPORATION COMMISSION 1065524
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: NA
Purchaser: _____

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>08/25/2011</u>	<u>08/29/2011</u>	<u>08/29/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-25703-00-00
Spot Description: _____
NW SE NE NE Sec. 19 Twp. 16 S. R. 21 East West
4455 Feet from North / South Line of Section
495 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Franklin
Lease Name: Brown Well #: AI-3
Field Name: _____
Producing Formation: Squirrel
Elevation: Ground: 963 Kelly Bushing: 963
Total Depth: 738 Plug Back Total Depth: 693
Amount of Surface Pipe Set and Cemented at: 22 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 722
feet depth to: 0 w/ 111 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 Gattisor Date: 10/18/2011



1065524

Operator Name: Altavista Energy, Inc. Lease Name: Brown Well #: AI-3
 Sec. 19 Twp. 16 S. R. 21 East West County: Franklin

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>Squirrel</td> <td>646</td> <td>+317</td> </tr> </table>	Name	Top	Datum	Squirrel	646	+317
Name	Top	Datum					
Squirrel	646	+317					

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	20	22	Portland	3	NA
Production	5.625	2.875	6	722	50/50 Poz	111	See 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 <i>(Amount and Kind of Material Used)</i>	Depth
3	646-661 - 47 Perfs - 2" DML RTG		

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.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Franklin County, KS
 Well: Brown AI-3
 Lease Owner: Altavista

Town Oilfield Service, Inc.
 (913) 837-8400

Commenced Spudding:
 8/25/2011

WELL LOG

Thickness of Strata	Formation	Total Depth
0-11	Soil/Clay	11
28	Lime	39
4	Shale	43
19	Lime	62
39	Shale	101
25	Lime	126
69	Shale	195
22	Lime	217
11	Shale	228
1	Lime	229
14	Shale	243
6	Lime	249
27	Shale	276
9	Lime	285
7	Shale	292
1	Lime	293
16	Shale	309
24	Lime	333
7	Shale	340
24	Lime	364
4	Shale	368
11	Lime	379
46	Shale	425
7	Sand	432
55	Shale	487
11	Sand	498
38	Shale	536
5	Lime	541
41	Shale	582
8	Lime	590
11	Shale	601
4	Lime	605
21	Shale	626
2	Lime	628
9	Shale	637
5	Lime	642
4	Shale	646
15	Sand	661
4	Sand	665
73	Shale	738-TD

Brown Farm: Franklin County
KS State: Well No. AT-3

Elevation _____
 Commenced Spuding E-25 .20 11
 Finished Drilling E-29 .20 11
 Driller's Name Jeff Town
 Driller's Name Wes Ballard
 Driller's Name Steve Scott
 Tool Dresser's Name _____
 Tool Dresser's Name _____
 Tool Dresser's Name _____
 Contractor's Name TOS
19 16 21
 (Section) (Township) (Range)
 Distance from S line, _____ ft.
 Distance from E line, _____ ft.

3 Sacks

889-903

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
 8" Set _____ 8" Pulled _____
~~7 1/8~~ Set 22' 6 1/2" Pulled _____
 4" Set _____ 4" Pulled _____
 2 1/8" Set 693' Ball 2" Pulled _____

722 Total, 738TD

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.

Brown AI-3

Thickness of Strata	Formation	Total Depth	Remarks
0-11	Soil - clay	11	
28	Lime	39	
4	Shale	43	
19	Lime	62	
39	Shale	101	
25	Lime	126	
69	Shale	195	
22	Lime	217	
11	Shale	228	
1	Lime	229	
14	Shale	243	
6	Lime	249	
27	Shale	276	
9	Lime	285	
7	Shale	292	
1	Lime	293	
16	Shale	309	
24	Lime	333	
7	Shale	340	
24	Lime	364	
4	Shale	368	
11	Lime	379	Mertha
46	Shale	425	
7	sand	432	NO Oil
55	Shale	487	
11	sand	498	NO Oil
38	Shale	536	

536

Thickness of Strata	Formation	Total Depth	Remarks
5	Lime	541	
41	Shale	582	
8	Lime	590	
11	Shale	601	
4	Lime	605	
21	Shale	626	
2	Lime	628	
9	Shale	637	
5	Lime	642	Drawn
4	Shale	646	
Perf. 15	Sand	661	Core - 19ft. 647-654 Bad
4	Shale	665	No oil
	Shale	728	T.D



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 # 243878

Invoice Date: 08/31/2011 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

BROWN AI-3
32793
SE 19 16 21 FR
08/29/2011
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	111.00	10.4500	1159.95
1118B	PREMIUM GEL / BENTONITE	187.00	.2000	37.40
1111	GRANULATED SALT (50 #)	215.00	.3500	75.25
1110A	KOL SEAL (50# BAG)	555.00	.4400	244.20
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
495 CEMENT PUMP	1.00	975.00	975.00
495 EQUIPMENT MILEAGE (ONE WAY)	20.00	4.00	80.00
495 CASING FOOTAGE	722.00	.00	.00
503 MIN. BULK DELIVERY	1.00	330.00	330.00
503 WATER TRANSPORT (CEMENT)	2.00	112.00	224.00

Parts: 1588.63 Freight: .00 Tax: 123.92 AR 3321.55
 Labor: .00 Misc: .00 Total: 3321.55
 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 32793
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
8/29/11	3244	Brown #AI.3	SE19	16	21	FR
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
JOB TYPE			CEMENT LEFT IN CASING			
HOLE SIZE			RATE			
HOLE DEPTH			OTHER			
CASING DEPTH			DISPLACEMENT PSI			
DRILL PIPE			MIX PSI			
SLURRY WEIGHT			WATER gal/sk			
SLURRY VOL			DISPLACEMENT PSI			
WATER gal/sk			MIX PSI			
CEMENT LEFT IN CASING			RATE			
DISPLACEMENT PSI			MIX PSI			
MIX PSI			RATE			

REMARKS: Establish rate. Mix + Pump 1/2 Gal ESA-41 + 1/2 Gal HE-100 Polymer
Flush. Circulate from pit to condition hole. Mix + Pump
111 SKS 50/50 Por Mix Cement 2% Gel 5% Salt 5% Kol Seal
per sack. Cement to surface Flush pump & lines clean. Displace
2 1/2" Rubber plug to back w/ 4.03 B'BLs Fresh Water. Pressure
to 750# PSI. Release pressure to set float valve. Shut in
Casing.

T.O.S. Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	975 ⁰⁰
5406	20	MILEAGE	495	800 ⁰⁰
5402	722'	Casing footage		N/C
5407	Mindeman	Ten Miles		330 ⁰⁰
5501C	2 hrs	Transport		224 ⁰⁰
1124	111 SKS	50/50 Por Mix Cement		1159 ²⁵
1118B	187 #	Premium Gel		37 ⁴⁰
111	215 #	Granulated Salt		75 ²⁵
1110A	555 #	Kol Seal		244 ²⁰
4407	1	2 1/2" Rubber plug		28 ⁰⁰
1143	1/2 Gal	ESA-41		20 ²⁰
1401	1/2 Gal	HE 100 Polymer		23 ⁰⁰
			7.8%	SALES TAX
				ESTIMATED TOTAL

243878

Flavin 0737
AUTHORIZATION [Signature] TITLE _____ DATE _____
ESTIMATED TOTAL 3321⁵⁵

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.