



KANSAS CORPORATION COMMISSION 1081439
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: _____

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>01/17/2012</u>	<u>01/19/2012</u>	<u>01/19/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-091-23501-00-00
Spot Description: _____
SW NE SW NW Sec. 20 Twp. 14 S. R. 22 East West
3400 Feet from North / South Line of Section
4505 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Johnson
Lease Name: Guetterman Well #: A-4
Field Name: _____
Producing Formation: Bartlesville
Elevation: Ground: 1026 Kelly Bushing: 1026
Total Depth: 948 Plug Back Total Depth: 906
Amount of Surface Pipe Set and Cemented at: 21 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 938
feet depth to: 0 w/ 129 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 30 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: 05/18/2012



1081439

Operator Name: Altavista Energy, Inc. Lease Name: Guetterman Well #: A-4
 Sec. 20 Twp. 14 S. R. 22 East West County: Johnson

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>878</td> <td>+148</td> </tr> </table>	Name	Top	Datum	Bartlesville	878	+148
Name	Top	Datum					
Bartlesville	878	+148					

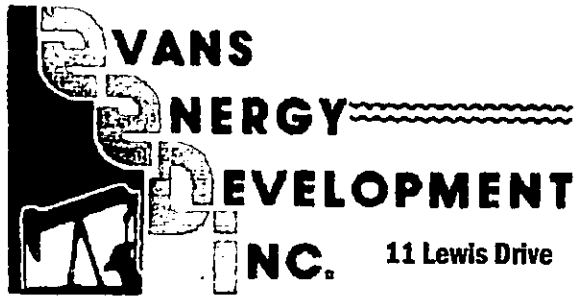
CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9.875	7	20	21	Portland	5	NA
Production	5.625	2.875	6	938	50/50 Poz	129	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	878-887 - 28 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>03/28/2012</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 Bbbs. <u>2</u>	Gas Mcf	Water Bbbs. 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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11 Lewis Drive

Paola, KS 66071

Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Altavista Energy, Inc.

Guetterman #A-4

API # 15-091-23,501

January 17 - January 19, 2012

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
14	soil & clay	14
2	sand & clay	16
2	clay	18
43	shale	61
6	lime	67
14	shale	81
15	lime	96
7	shale	103
10	lime	113
9	shale	122
15	lime	137
20	shale	157
18	lime	175
7	shale	182
53	lime	235
21	shale	256
9	lime	265
18	shale	283
6	lime	289
6	shale	295
16	lime	311
24	shale	335
2	lime	337
10	shale	347
24	lime	371
7	shale	378
23	lime	401
3	shale	404
16	lime	420 base of the Kansas City
26	shale	446
6	sand	452
141	shale	593
13	lime	606
5	shale	611
4	lime	615
18	shale	633
3	lime	636

31	shale	667
3	lime	670
13	shale	683
13	lime	696
58	shale	754
9	broken sand	763 brown & grey sand, lite bleeding
116	shale	879
0.5	broken sand	87905 brown & white sand, no bleeding
2.3	oil sand	881.8 black, good bleeding & good sand
0.4	broken sand	882.2 black & white sand, good bleeding
0.8	oil sand	883 black good bleeding & good sand
1	broken sand	884 black & grey sand, good bleeding 90% oil sand
2	broken sand	886 brown & white sand, no bleeding
62	shale	948 TD

Drilled a 9 7/8" hole to 20.5'

Drilled a 5 5/8" hole to 948'

Set 20.5' of 7" surface casing cemented with 5 sacks of cement.

Set 937.8' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp, 1 seating nipple, and 1 baffle.

	Core Times	
	<u>Minutes</u>	<u>Seconds</u>
880	1	6
881		49
882		57
883		20
884		24
885		27
886		29
887		33
888		39
889		34
890		39
891		3
892		36
893		39
894		35
895		38
896		49
897		48



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 # **247378**

Invoice Date: **01/26/2012** 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

GUETTERMAN A-4
36859
NW 20 14 22 JO
01/19/12
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	129.00	10.9500	1412.55
1118B	PREMIUM GEL / BENTONITE	217.00	.2100	45.57
1111	SODIUM CHLORIDE (GRANULA	250.00	.3700	92.50
1110A	KOL SEAL (50# BAG)	645.00	.4600	296.70
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
369 80 BBL VACUUM TRUCK (CEMENT)	2.50	90.00	225.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
495 CASING FOOTAGE	939.00	.00	.00
503 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1919.15 Freight: .00 Tax: 144.42 AR 3788.57
 Labor: .00 Misc: .00 Total: 3788.57
 Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808 EL DORADO, KS 316/322-7022 EUREKA, KS 620/583-7664 PONCA CITY, OK 580/762-2303 OAKLEY, KS 785/672-2227 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 GILLETTE, WY 307/686-4914



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 36859
LOCATION Ottawa KS
FOREMAN Fred Maden

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1/19/12	3244	Centerman # A-4	NW 20	14	22	JO
CUSTOMER			TRUCK #			
Alto Vista Energy			DRIVER			
MAILING ADDRESS			TRUCK #			
4595 Hiway 33			DRIVER			
CITY			STATE			
Wellsville			KS			
ZIP CODE			66092			

JOB TYPE Logging HOLE SIZE 5 7/8 HOLE DEPTH _____ CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 939 DRILL PIPE Baffle in TUBING @ 908 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 1/2" Ply + 31'
 DISPLACEMENT 5.28 B/D DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 B/PM

REMARKS: Wash down last ft. Casing Mix 1/2 Gal ESA-41 + 1/2 Gal HE-150
 Polymer Flush. Circulate to condition hole. Mix + Pump
 129 sks 50/50 Por Mix Cement 270 Gal 5% Salt 5% Nol Seal/614
 Cement to surface. Flush pump + lines clean. Displace 2 1/2"
 rubber plug to baffle in casing. Pressure to 800 PSI.
 Release pressure to set float valve. Shut in casing.

Evans Energy Dev. Inc. (Travis)

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	795	1030.00
5406	30 mi	MILEAGE		720.00
5402	939	Casing footage		N/C
5407	Minimum	Ton Miles	583	350.00
55020	2 1/2 hrs	80 B Bl Vac Truck	369	225.00
1124	129 sks	50/50 Por Mix Cement		1412.53
115B	217 #	Premium Cel		415.57
1111	250 #	Granulated Salt		92.50
1110A	645 #	Nol Seal		296.20
4402	1	2 1/2" Rubber plug		28.00
1143	1/2 Gal	ESA-41		20.20
1401	1/2 Gal	HE-150 Polymer		53.63
			7.525	SALES TAX
				ESTIMATED
				TOTAL
				3788.57

Ravin 3787

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