



KANSAS CORPORATION COMMISSION 1094368  
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>12/08/2011</u>	<u>12/12/2011</u>	<u>12/12/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-121-28950-00-00

Spot Description: \_\_\_\_\_  
SW NW SE SW Sec. 18 Twp. 17 S. R. 24  East  West  
670 Feet from  North /  South Line of Section  
3765 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Miami  
Lease Name: Spindle Well #: AI-1

Field Name: \_\_\_\_\_  
Producing Formation: Peru  
Elevation: Ground: 999 Kelly Bushing: 999  
Total Depth: 460 Plug Back Total Depth: 418  
Amount of Surface Pipe Set and Cemented at: 20 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 450  
feet depth to: 0 w/ 63 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: Doranna Gombor Date: 09/24/2012



1094368

Operator Name: Altavista Energy, Inc. Lease Name: Spindle Well #: AI-1  
Sec. 18 Twp. 17 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Peru	376	+623
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				
Gamma Ray/Neutron/CCL				

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	20	Portland	6	NA
Production	5.625	2.875	6	450	50/50 Poz	63	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	-			

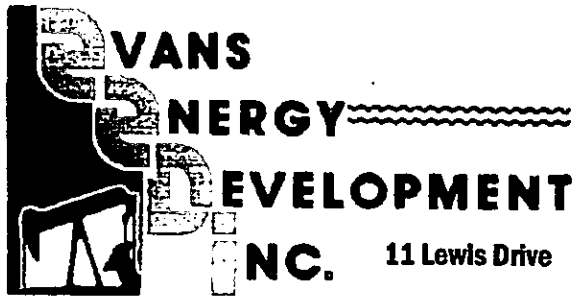
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
3	376-392 - 50 Perfs - 2" DML RTG		

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR: \_\_\_\_\_ Producing Method:  Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

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 <i>(Specify)</i> _____	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.

Spindle AI-1

API # 15-121-28,950

December 8 - December 12, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
2	soil & clay	2
12	lime	14
18	shale	32
11	lime	43
10	shale	53
2	lime	55
20	shale	75
2	lime	77
26	shale	77 76 light oil show
6	silty shale	103 no oil
13	shale	109
12	lime	122
14	shale	134
27	lime	148
7	shale	175 oil show
20	lime	182
4	shale	202 base of the Kansas City
3	lime	206
4	shale	209
5	lime	213
4	shale	218
11	broken sand	222
12	shale	233 borwn & green, limey on top, good bleeding
1	broken sand	245
3	oil sand	246 ok bleeding
8	broken sand	249 brown sand, ok bleeding
9	silty shale	257
73	shale	266
5	silty shale	339
32	shale	344
1	limey sand	376
2	lime & sand	377 brown sand, no bleeding
1	lime	379 brown sand, lite bleeding
2	broken sand	380
3	lime & sand	382 brown & green sand, 90% bleeding
		385 brown & green sand with lime seams few thin bleeding seams
6	broken sand	391 brown & green sand with a few grey shale seams, 50% bleeding sand

Spindle #AI-1

Page 2

34	shale	425
8	lime	433
20	shale	453
7	lime	460 TD

Drilled a 9 7/8" hole to 20.4'

Drilled a 5 5/8" hole to 460'

Set 20.4' of 7" surface casing cemented with 6 sacks of cement.

Set 449.8' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 seating nipple, 1 float shoe, 1 baffle and 1 clamp.

Core Times		
	<u>Minutes</u>	<u>Seconds</u>
378		52
379		49
380	1	8
381	1	55
382	1	10
383		39
384	1	26
385		47
386		41
387		49
388		32
389		37
390		37
391		38
392		45
393		47
394		52
395		50
396	1	9
397		54



**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 # 246478

Invoice Date: 12/15/2011 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

SPINDLE AI-1  
33172  
SW 18 17 24 MI  
12/12/11  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	63.00	10.9500	689.85
1118B	PREMIUM GEL / BENTONITE	106.00	.2100	22.26
1111	GRANULATED SALT (50 #)	122.00	.3700	45.14
1110A	KOL SEAL (50# BAG)	315.00	.4600	144.90
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)	2.00	90.00	180.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	35.00	4.00	140.00
495 CASING FOOTAGE	449.00	.00	.00
558 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 973.98 Freight: .00 Tax: 73.53 AR 2747.51  
 Labor: .00 Misc: .00 Total: 2747.51  
 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

TICKET NUMBER 33172

LOCATION of Iowa KS

FOREMAN Fred Maden

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
12/12/11	3244	Spindle # AI:1	SW 18	17	24	MI
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Mailing Address			506	FREMAD	Safety Way	
CITY			495	HARDEC	NO	
STATE			370	CASIKEN	CR	
ZIP CODE			558	REIDET & RYACIN	KD. RS	
Wellsville						
KS						
66092						

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 460 CASING SIZE & WEIGHT 2 1/8 EUE  
 CASING DEPTH 449 DRILL PIPE Bottle @ TUBING 4 1/2 OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL. \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 30' x Plug  
 DISPLACEMENT 2.43 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5BPM

REMARKS: Estab blsk pump rate. Mix + Pump 1 Gal ESA .41 + 1/2 Gal HE 100  
Polymer Flush. Circulate Flush to condition hole. Mix +  
Pump 63 SKS 50/50 Per Mix Cement 2 1/2 Gal 5% Salt 5# Kal  
Seal/sk. Cement to surface. Flush pump + lines clean.  
Displace 2 1/2" Rubber plug to bottle w/ @ 5.43 BBL Fresh water  
pressure to 250# PSI. Release pressure to set float valve.  
Shut in Casing

*Fred Maden*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 <sup>00</sup>
5406	36	MILEAGE	495	140 <sup>00</sup>
5402	449	Casing Footage		N/C
5407	MINIMUM	Ton Miles	558	350 <sup>00</sup>
5302C	2 hrs	80 BBL Vac Truck	370	180 <sup>00</sup>
1124	63 SKS	50/50 Per Mix Cement		689 <sup>00</sup>
118B	106 #	Premium Gel		22 <sup>26</sup>
111	120 #	Granulated Salt		45 <sup>17</sup>
110A	315 #	Kal Seal		144 <sup>90</sup>
4402	1	2 1/2" Rubber Plug		28 <sup>00</sup>
1143	1/2 Gal	ESA-41		20 <sup>20</sup>
1401	1/2 Gal	HE 100 Polymer		23 <sup>63</sup>
246418				
			7.55%	SALES TAX
				ESTIMATED
				TOTAL
				2777 <sup>51</sup>

Rev'n 5737

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