



KANSAS CORPORATION COMMISSION 1104800
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: _____

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>08/14/2012</u>	<u>08/16/2012</u>	<u>08/16/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-045-21804-00-00

Spot Description: _____
NW NE NE SW Sec. 1 Twp. 15 S. R. 20 East West
2420 Feet from North / South Line of Section
3120 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Douglas

Lease Name: Mary Bell Well #: A-20

Field Name: _____

Producing Formation: Squirrel

Elevation: Ground: 1030 Kelly Bushing: 1030

Total Depth: 900 Plug Back Total Depth: 827

Amount of Surface Pipe Set and Cemented at: 45 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 859

feet depth to: 0 w/ 116 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 Gamson Date: 12/19/2012



1104800

Operator Name: Altavista Energy, Inc. Lease Name: Mary Bell Well #: A-20
 Sec. 1 Twp. 15 S. R. 20 East West County: Douglas

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>Squirrel</td> <td>799</td> <td>+231</td> </tr> </table>	Name	Top	Datum	Squirrel	799	+231
Name	Top	Datum					
Squirrel	799	+231					

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	19	45	Portland	3	NA
Production	5.625	2.875	7	859	50/50 Poz	116	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	799-808 - 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>09/17/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____	
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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Douglas County, KS
Well: Mary Bell A-20
Lease Owner: AltaVista

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

Commenced Spudding:
8/14/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-28	Soil-Clay	28
121	Shale	149
5	Lime	154
7	Shale	161
13	Lime	174
8	Shale	182
7	Lime	189
7	Shale	196
22	Lime	218
14	Shale	232
3	Lime	235
12	Shale	247
17	Lime	264
74	Shale	338
23	Lime	361
17	Shale	378
7	Lime	385
25	Shale	410
16	Lime	426
7	Shale	433
1	Lime	434
9	Shale	443
26	Lime	469
10	Shale	479
21	Lime	500
4	Shale	504
4	Lime	508
4	Shale	512
6	Lime	518
173	Shale	691
6	Lime	697
41	Shale	738
3	Lime	741
21	Shale	762
1	Lime	763
22	Shale	785
1	Lime	786
3	Shale	789
8	Shale and Lime	797
2	Sand and Lime	799

Short Cuts

TANK CAPACITY

BBLs. (42 gal.) equals $D^2 \times 1.4 \times h$

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

* D - Diameter of Pump Sheave

* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

BELT LENGTH - $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

* Need these to figure belt length

TO FIGURE AMPS: $\frac{WATTS}{VOLTS} = AMPS$

746 WATTS equal 1 HP

Log Book

Well No. A-20

Farm Mary Bell

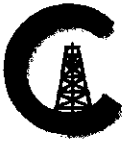
KS Douglas
(State) (County)

1 15 20
(Section) (Township) (Range)

For Altavista Energy
(Well Owner)

Town Oilfield Services, Inc.
1207 N. 1st East
Louisburg, KS 66053
913-710-5400

Thickness of Strata	Formation	Total Depth	Remarks
0-28	soil-clay	28	
121	shale	149	
5	Lime	154	
7	shale	161	
13	Lime	174	
8	shale	182	
7	Lime	189	
7	shale	196	
22	Lime	218	
14	shale	232	
3	Lime	235	
12	shale	247	
17	Lime	264	
74	shale	338	
23	Lime	361	
17	shale	378	
7	Lime	385	
25	shale	410	
16	Lime	426	
7	shale	433	
1	Lime	434	
9	shale	443	
26	Lime	469	
10	shale	479	
21	Lime	500	
4	shale	504	
4	Lime	508	



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 # 252151

Invoice Date: 08/17/2012 Terms: 0/0/30,n/30

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ALTAVISTA ENERGY INC
4595 K-33 HIGHWAY
P.O. BOX 128
WELLSVILLE KS 66092
(785)883-4057

MARY BELL A-20
37582
1-15-20
08-16-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	116.00	10.9500	1270.20
1118B	PREMIUM GEL / BENTONITE	295.00	.2100	61.95
1111	SODIUM CHLORIDE (GRANULA	224.00	.3700	82.88
1110A	KOL SEAL (50# BAG)	580.00	.4600	266.80
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	4.00	100.00
495 CASING FOOTAGE	858.00	.00	.00
558 MIN. BULK DELIVERY	1.00	350.00	350.00
675 80 BBL VACUUM TRUCK (CEMENT)	1.50	90.00	135.00

Parts: 1733.46 Freight: .00 Tax: 126.54 AR 3475.00
 Labor: .00 Misc: .00 Total: 3475.00
 Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 37582
LOCATION Oxtawa KS
FOREMAN Fred Madar

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
8/16/12	3244	Mary Bell # A-20	SW 14	15	20	DG
CUSTOMER Altaivista Energy Inc			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 4595 Highway 33			506	Fred Mad	Safety	W/M
CITY Wellsville	STATE KS	ZIP CODE 66092	495	Har Bec	HB	0
			675	Kei Det	KD	
			558	Breman	BM	

JOB TYPE Log string HOLE SIZE _____ HOLE DEPTH 900 CASING SIZE & WEIGHT 2 7/8" EVE
CASING DEPTH 655 DRILL PIPE Baffle in TUBING @ 827 OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/ak _____ CEMENT LEFT in CASING 31' + Plug
DISPLACEMENT 4.8 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Establish pump rate. Mix + Pump 1/2 Gal NE-100 Polymer
Flush. Circulate to condition hole. Mix + Pump 100# Gal
Flush. Mix + Pump 116 sks 50/50 Per Mix Cement 270 Gal
5% Salt 5# Kol Seal/sk. 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
Value. Shut in Casing

ToS Drilling - Was

Fred Madar

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	25 mi	MILEAGE	495	100 ⁰⁰
5402	655	Casing footage		N/C
5407	Minimum	Ten Miles	550	350 ⁰⁰
5302C	12 hr	80 BBL vac truck	675	135 ⁰⁰
1124	116 sks	50/50 Per Mix Cement		1270 ²⁰
1118B	295#	Premium Gel		6195
1111	224#	Granulated Salt		82 ⁵⁸
1110A	580#	Kol Seal		266 ⁵⁰
4402	1	2 1/2" Rubber Plug		25 ⁰⁰
1401	1/2 Gal	NE-100 Poly Gher		23 ⁶³
			7.3%	SALES TAX
				ESTIMATED TOTAL
				3475.00

Revin 3737

AUTHORIZATION Wesley Dollard 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.

252151