



KANSAS CORPORATION COMMISSION 1104814
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 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>08/22/2012</u>	<u>08/24/2012</u>	<u>08/24/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-045-21803-00-00

Spot Description:
SW SE NE SW Sec. 1 Twp. 15 S. R. 20 East West
1445 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 #: AI-23

Field Name: _____
Producing Formation: Squirrel

Elevation: Ground: 1047 Kelly Bushing: 1047
Total Depth: 920 Plug Back Total Depth: 849

Amount of Surface Pipe Set and Cemented at: 42 Feet
Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 881
feet depth to: 0 w/ 123 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 Gamson Date: 12/19/2012



1104814

Operator Name: Altavista Energy, Inc. Lease Name: Mary Bell Well #: AI-23
 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>811</td> <td>+236</td> </tr> </table>	Name	Top	Datum	Squirrel	811	+236
Name	Top	Datum					
Squirrel	811	+236					

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	42	Portland	4	NA
Production	5.625	2.875	7	881	50/50 Poz	123	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	811-821 - 31 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 (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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Douglas County, KS
 Well: Mary Bell AI-23
 Lease Owner: AltaVista

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

Commenced Spudding:
 8/22/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-3	Soil-Clay	3
1	Lime	4
8	Clay	12
5	Lime	17
145	Shale	162
4	Lime	166
8	Shale	174
12	Lime	186
9	Shale	195
7	Lime	202
6	Shale	208
21	Lime	229
29	HS	258
17	Lime	275
75	Shale	350
22	Lime	372
17	Shale	389
8	Lime	397
25	Shale	422
14	Lime	436
8	Shale	444
1	Lime	445
12	Shale	457
25	Lime	482
8	Shale	490
22	Lime	512
4	Shale	516
4	Lime	520
4	Shale	524
7	Lime	531
173	Shale	704
6	Lime	710
16	Shale	726
3	Lime	729
20	Shale	749
3	Lime	752
20	Shale	772
3	Lime	775
14	Shale	789
2	Lime	791

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals $D^2 \times h \times 14$

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. AI-23

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

Mary Bell Farm: Douglas County
 KS State: Well No. A-23

Elevation 1047

Commenced Spudding Aug 22 20 12

Finished Drilling Aug 24 20 12

Driller's Name Wesley Dollard

Driller's Name

Driller's Name

Tool Dresser's Name Ryan Ward

Tool Dresser's Name Colt Stone

Tool Dresser's Name

Contractor's Name TOS

1 15 20

(Section) (Township) (Range)
 Distance from S line, 1445 ft.

Distance from E line, 3120 ft.

4 sacks

1 core

14 hrs

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____

8" Set _____ 8" Pulled _____

7 5/8" Set 42 6 1/2" Pulled _____

4" Set _____ 4" Pulled _____

2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
849.	20	Baffle			
880.	90	Float			
				27	8

Thickness of Strata	Formation	Total Depth	Remarks
0-3	soil-clay	3	
1	Lime	4	
8	clay	12	
5	Lime	17	
145	shale	162	
4	Lime	166	
8	shale	174	
12	Lime	186	
9	shale	195	
7	Lime	202	
6	shale	208	
21	Lime	229	
29	shale	258	
17	Lime	275	
75	shale	350	
22	Lime	372	
17	shale	389	
8	Lime	397	
25	shale	422	
14	Lime	436	
8	shale	444	
1	Lime	445	
12	shale	457	
25	Lime	482	
8	shale	490	
22	Lime	512	
4	shale	516	

516

Thickness of Strata	Formation	Total Depth	Remarks
4	Lime	520	
4	Shale	524	
7	Lime	531	Herthog
173	Shale	704	
6	Lime	710	
16	Shale	726	
3	Lime	729	
20	Shale	749	
3	Lime	752	
20	Shale	772	
3	Lime	775	
14	Shale	789	
2	Lime	791	
9	Shale	800	
1	Lime	801	
6	Shale	807	
1	Sandy shale & lime	808	
1	sand & lime	809	no Oil
1	sand	810	Slight odor - grey no show
15	core	825	
6	sandy shale	831	
89	Shale	920	TD

core

Thickness of Strata	Formation	Total Depth	Remarks
		810	
.5	sand	810.5	grey - no Oil
6	sand	816.5	Solid Oil - good saturation
5.5	sand	822	laminated 75% Oil
3	sand	825	grey no Oil



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 # 252374

Invoice Date: 08/27/2012 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

MARY BELL A-I-23
39530
1-15-20
08-24-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	123.00	10.9500	1346.85
1118B	PREMIUM GEL / BENTONITE	307.00	.2100	64.47
1111	SODIUM CHLORIDE (GRANULA	238.00	.3700	88.06
1110A	KOL SEAL (50# BAG)	615.00	.4600	282.90
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
369 80 BBL VACUUM TRUCK (CEMENT)	1.50	90.00	135.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	4.00	100.00
495 CASING FOOTAGE	881.00	.00	.00
503 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1833.91 Freight: .00 Tax: 133.88 AR 3582.79
 Labor: .00 Misc: .00 Total: 3582.79
 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 39530

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
8/24/12	3244	Mary Bell # A-I-23	SW 1	15	20	DG
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Mailing Address			506	Fre Mad	Safety	Mid
CITY			495	Har Bec	AB	
STATE			369	Nik Hoe	MN	
ZIP CODE			503	Dan Det	DD	

JOB TYPE Long string HOLE SIZE 5 1/8 HOLE DEPTH 920 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 881 DRILL PIPE Baffle in TUBING @ 850 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 21 + Plug
 DISPLACEMENT 4.9400 DISPLACEMENT PSI _____ MIX PSI _____ RATE 50 RPM

REMARKS: Establish pump rate. Mix & Pump 1/2 Gal HE-100 Polymer.
 Circulate to condition hole. Mix & Pump 100* Gal Flush
 Mix & Pump 123 sks 50/50 Por Mix Cement 2% Gel 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 valve
 Shut in casing

Top Drilling Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	49.5	1030.00
5406	25 mi	MILEAGE	4.00	100.00
5402	881	Casing footage		n/c
5407	Minimum	Ton Miles	503	350.00
5502c	1 1/2 hr	EO BBL Vac Truck	369	135.00
1124	123 sks	50/50 Por Mix Cement		1376.55
1128B	307*	Premium Gel		64.17
1111	238*	Granulated Salt		88.06
1110A	615*	Kol Seal		252.90
4402	1	2 1/2" Rubber Plug		28.00
1401	1/2 Gal	HE-100 Polymer		23.63
			7.3%	SALES TAX
				ESTIMATED
				TOTAL

AUTHORIZATION [Signature] TITLE MANAGER DATE _____
 SALES TAX ESTIMATED TOTAL 3582.79

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

252374