



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

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 #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

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: _____ Date: _____



1083882

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input 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

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

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 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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Leis Oil Services, LLC

1410 150th Rd
Yates Center, KS 66783

Invoice

Number: 1001

Date: April 10, 2012

Bill To:

Greg Lair
Piqua Petro
1331 Xylan Rd
Piqua, KS 66761

Ship To:

Greg Lair
Piqua Petro
1331 Xylan Rd
Piqua, KS 66761

PO Number	Terms	Project
		10 wells March 2012

Date	Description	Hours	Rate	Amount
3-5-12	Drill pit	100.00	1.00	100.00
3-5-12	cement for surface	8.00	11.00	88.00
3-6-12	Hammond E 1-12	1,114.00	6.25	6,962.50
3-7-12	Drill pit	100.00	1.00	100.00
3-7-12	cement for surface	8.00	11.00	88.00
3-12-12	Hammond E 8-12	1,103.00	6.25	6,893.75
3-13-12	Drill pit	100.00	1.00	100.00
3-13-12	cement for surface	8.00	11.00	88.00
3-14-12	Wingrave 56-12	Depth - 1,083.00	6.25	6,768.75
3-15-12	Drill pit	100.00	1.00	100.00
3-15-12	cement for surface	8.00	11.00	88.00
3-16-12	Wingrave 55-12	1,103.00	6.25	6,893.75
3-19-12	cement for surface	8.00	11.00	88.00
3-26-12	Wingrave 57-12	1,103.00	6.25	6,893.75
3-27-12	Drill pit	100.00	1.00	100.00

pd Full Amount 4/10/12

0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$72,974.25	\$0.00	\$0.00	\$0.00	\$72,974.25

#13579



LEIS OIL SERVICES



111 East Mary • Yates Center, Kansas 66783 • (620) 625-3676

Operator License #: 30345	API #: 15-207-28078-00-00
Operator: Piqua Petro, Inc.	Lease: Wingrave
Address: 1331 Xylan Rd Piqua, KS 66761	Well #: 56-12
Phone: 620.433.0099	Spud Date: 3/13/12 Completed: 3/14/12
Contractor License: 32079	Location: S2-N2-SE-NW of 16-24-16E
T.D. : 1103 T.D. of Pipe: 1101 1082	3485 Feet From South
Surface Pipe Size: 7" Depth: 41'	1980 Feet From West
Kind of Well: Oil	County: Woodson

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
12	Soil and Clay	0	12	12	Shale	942	954
143	Shale	12	155	9	Lime	954	963
53	Lime	155	208	11	Shale	963	974
6	Shale	208	214	4	Lime	974	979
134	Lime	214	348	17	Shale	979	991
204	Lime	260	464	12	Oil Sand	991	1003
15	Shale	464	479	32	Shale	1003	1035
6	Lime	479	485	1	Lime	1035	1036
35	Shale	485	520	3	Shale	1036	1039
3	Lime	520	523	1	Lime	1039	1040
5	Shale	523	528	8	Oil Sand	1040	1048
72	Lime	528	600	55	Shale	1048	1103
3	Black Shale	600	603				
18	Lime	603	621				
2	Shale	621	623				
3	Black Shale	623	626				
25	Lime	626	651				
159	Shale	651	810				
3	Lime	810	813				
22	Shale	813	835				1083
10	Lime	835	845		T.D.		1103
59	Shale	845	904		T.D. of Pipe		1101
3	Lime	904	907				1082
3	Shale	907	910				
13	Lime	910	923				
13	Shale	923	936				
4	Lime	936	940				
2	Black Shale	940	942				



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

1st well

TICKET NUMBER 56758
FIELD TICKET REF # 47387
LOCATION Thayer
FOREMAN Brett Busby

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-29-12		Wingrave # 56-12	16	29S	16E	WO
CUSTOMER Piqua Petco, Inc.			* Safety meeting attendees			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY			476	Josh	488T103	Stan
STATE			490	Donnie	618T95	Marvin
ZIP CODE			478	Tim	619T91	George
			582	Wes		
			424	Eric		
			488T102	Junior		

WELL DATA

CASING SIZE	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE <u>2 7/8 EUE</u>	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
<u>972-78 (9)</u>	<u>Squirrel</u>
<u>1019-29 (14)</u>	

TYPE OF TREATMENT
Acid spot + Acid Frac w/acid OTF

CHEMICALS

<u>KCL sub - Biocide - Breaker</u>
<u>Acid - Inhibitor - Stim Oil</u>

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
PAD	20	20				BREAKDOWN 1500
20-40		20		300 #		START PRESSURE
12-20						END PRESSURE
12-20				3200 #		BALL OFF PRESS
Bio-balls (6) + (3)		20-19				ROCK SALT PRESS
12-20		19				ISIP 550
12-20				1,500 #		5 MIN
Bio-balls (2)		19-16			3,000	10 MIN
12-20		16				15 MIN
12-20		16		1,500 #		MIN RATE
FLUSH CASING	10	16				MAX RATE
Release balls to T.D. x 2			TOTAL	6,500 #		DISPLACEMENT 6.0
OVERFLUSH	15	20	SAND		1500	
TOTAL	180					

REMARKS: held safety - procedure meeting before jobs
 Spotted 75 gal. -15% HCL acid on perfs
 * Blend 150 gal raw HCL acid OTF
 Location 9:30AM - 10:30AM
 45 miles
 AUTHORIZATION _____ TITLE _____ DATE 3-29-12

Terms and Conditions are printed on reverse side.