



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: _____



1084255

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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LEIS OIL SERVICES



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

Operator License #: 30345	API #: 207-27833-00-00
Operator: Piqua Petro, Inc.	Lease: Sovoboda
Address: 1331 Xylan Rd Piqua, KS 66761	Well #: 34-11
Phone: 620.433.0099	Spud Date: 4/13/12 Completed: 4/16/12
Contractor License: 32079	Location: SE-NE-SE-SW of 3-24S-17E
T.D. : 1236 T.D. of Pipe: 1233	940 Feet From South
Surface Pipe Size: 7" Depth: 21'	2325 Feet From West
Kind of Well: Oil	County: Woodson

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
2	Soil	0	2	11	Shale	794	805
3	Gravel	2	5	1	Lime	805	807
4	Clay	5	9	34	Shale	807	841
31	Lime	9	40	1	Lime	841	842
111	Shale	40	151	10	Broken Sand	842	852
15	Lime	151	166	311	Shale	852	1163
15	Shale	166	181	1	Coal	1163	1164
67	Lime	181	248	9	Shale	1164	1173
63	Shale	248	311	13	Lime	1173	1186
92	Lime	311	403	10	Oil Break	1186	1196
4	Black Shale	403	407	40	Lime	1196	1236
22	Lime	407	429				
3	Shale	429	432				
26	Lime	432	458				
132	Shale	458	590				
1	Lime	590	591				
28	Shale	591	619				
5	Lime	619	624				
18	Shale	624	642				
10	Lime	642	652				
67	Shale	652	719				
1	Lime	719	720		T.D.		1236
4	Shale	720	724		T.D. of Pipe		1233
11	Lime	724	735				
13	Shale	735	748				
4	Lime	748	752				
22	Shale	752	774				
20	Lime	774	794				

Leis Oil Services, LLC1410 150th Rd
Yates Center, KS 66783**Invoice**

Number: 1001

Date: May 14, 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

Date	Description	Hours	Rate	Amount
4-12-12	Drill pit	1.00	100.00	100.00
4-12-12	cement for surface	10.00	12.60	126.00
4-13-12	Drilled Sovoboda 33-11	1,233.00	6.25	7,706.25
4-13-12	Drill pit	1.00	100.00	100.00
4-13-12	cement for surface	10.00	12.60	126.00
4-16-12	Drilled Sovoboda 34-11	1,236.00	6.25	7,725.00
4-17-12	Drill pit	1.00	100.00	100.00
4-17-12	cement for surface	8.00	12.60	100.80
4-18-12	drilled Stranghorner 2-12	1,253.00	6.25	7,831.25
4-19-12	Drill pit	1.00	100.00	100.00
4-20-12	cement for surface	10.00	12.60	126.00
4-20-12	Drilled Hammond E 6-12	1,116.00	6.25	6,975.00
4-23-12	Drill pit	1.00	100.00	100.00
4-24-12	cement for surface	8.00	12.60	100.80
4-24-12	Drilled Wingrave 59-12	1,073.00	6.25	6,706.25

0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$44,917.90	\$0.00	\$0.00	\$0.00	\$44,917.90



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 36439

LOCATION Eureka

FOREMAN Steve Reed

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
<u>4.17.12</u>	<u>4950</u>	<u>Savadeba 3411</u>	<u>3</u>	<u>24</u>	<u>17E</u>	<u>Woodson</u>
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
<u>Pigua Petroleum</u>			<u>485</u>	<u>Alan M.</u>		
MAILING ADDRESS			<u>479</u>	<u>Mark</u>		
<u>1331 Xylan Rd</u>						
CITY	STATE	ZIP CODE				
<u>Pigua</u>	<u>Ks</u>	<u>66761</u>				

JOB TYPE Logging (C) HOLE SIZE _____ HOLE DEPTH 1135' CASING SIZE & WEIGHT _____
 CASING DEPTH 1133 DRILL PIPE _____ TUBING 2 7/8 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING _____
 DISPLACEMENT 725 bbls DISPLACEMENT PSI 700* MIX 50% slurry 1200* RATE _____

REMARKS: Safety Meeting. Rig up to 2 7/8 Tubing. Break circulation w/ Fresh water. Pump 300' Gel Flush * 5 bbls Euster spacer. Mix 135 sks OWC w/ 1/2" Phenoseal pack. Shut down. Washout pump & lines. Staff 2 plugs Displace with 725 bbls Fresh water. Final pumping pressure 700* Bump plug 1200*. Close well in 700*. Good cement returns to surface. 6 bbls slurry to pit. Job Complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
<u>5461</u>	<u>1</u>	<u>PUMP CHARGE</u>	<u>1030.00</u>	<u>1030.00</u>
<u>5466</u>	<u>43</u>	<u>MILEAGE</u>	<u>4.00</u>	<u>180.00</u>
<u>1126</u>	<u>135 SKS</u>	<u>OWC Cement</u>	<u>18.80</u>	<u>2538.00</u>
<u>1107A</u>	<u>68"</u>	<u>Phenoseal 1/2" pack</u>	<u>1.29</u>	<u>87.72</u>
<u>1118B</u>	<u>300*</u>	<u>Gel Flush</u>	<u>.21</u>	<u>63.00</u>
<u>5407A</u>	<u>7.02</u>	<u>Tan mileage bulk Truck</u>	<u>1.34</u>	<u>483.31</u>
<u>4402</u>	<u>2</u>	<u>2 7/8 Top Rubber Plug</u>	<u>28.00</u>	<u>56.00</u>
			Sub Total	4378.03
			SALES TAX	<u>200.36</u>
			ESTIMATED	
			TOTAL	4578.39

Rev'n 3737

K. MCL *249147*

23%

AUTHORIZATION By Matt Kerr 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.