



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: _____



1089907

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



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

Operator License #: 30345		API #: 15-207-28121-00-00	
Operator: Piqua Petro Inc.		Lease: Wingrave	
Address: 1331 Xylan Rd Piqua, KS 66761		Well #: 59-12	
Phone: (620) 433-0099		Spud Date: 4-23-12 Completed: 4-24-12	
Contractor License: 32079		Location: SW-SW-SW-NE of 17-24S-16E	
T.D. : 1073	T.D. of Pipe: 1068	2470	Feet From North
Surface Pipe Size: 7"	Depth: 41'	2470	Feet From East
Kind of Well: Oil		County: Woodson	

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
6	Soil/Clay	0	6	1	Black Shale	982	983
111	Shale	6	177	9	Mucky shale	983	992
192	Lime	177	369	5	Oil Sand	992	997
7	Shale	369	376	3	Broken Sand/Shale	997	1000
70	Lime	376	446	34	Shale	1000	1034
17	Shale	446	463	1	Lime	1034	1035
2	Lime	463	465	1	Shale	1035	1036
7	Shale	465	472	1	Lime	1036	1037
5	Lime	472	477	36	Sandy Shale	1037	1073
37	Shale	477	514				
6	Lime	514	520				
5	Shale	520	525				
121	Lime	525	646				
161	Shale	646	807				
3	Lime	807	810		T.D.		1073
22	Shale	810	832		T.D. of Pipe		1068
9	Lime	832	841				
60	Shale	841	901				
3	Lime	901	904				
5	Shale	904	909				
12	Lime	909	921				
12	Shale	921	933				
3	Lime	933	936				
2	Black Shale	936	938				
13	Shale	938	951				
8	Lime	951	959				
12	Shale	959	971				
5	Lime	971	976				
6	Shale	976	982				



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 36447 ✓
LOCATION Eureka
FOREMAN Steve Mead

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
4-24-12	4950	Wingrave # 59-12				Woodson
CUSTOMER			TRUCK #			
MAILING ADDRESS			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
			DRIVER			

JOB TYPE Long String HOLE SIZE _____ HOLE DEPTH 1077 CASING SIZE & WEIGHT _____
CASING DEPTH 7068 DRILL PIPE _____ TUBING 2 3/8 OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING _____
DISPLACEMENT 6.30' DISPLACEMENT PSI 700 Bump plug 1200* RATE _____

REMARKS: Safety Meeting - Rig up to 2 3/8 Tubing. Break Circulation w/ Fresh Water. Pump 300# Gel Flush & 5 bbls Water Spacer. Mix 140 sks 60/40 Poz Mix Cement w/ 5# Kol Seal, 4% Gel & 1% Code 2. Shut down wash out pump & lines. Stuff 2 plugs Displace with 6.20 bbls Fresh water. Final pumping Pressure 700#. Bump plug 1200# Shut well in 600#. Good cement Returns to surface. Job Complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	40	MILEAGE	4.00	160.00
1131	140 sks	60/40 Poz Mix Cement	12.65	1771.00
110A	560#	Kol Seal 5# per/sk	.46	257.60
1118B	480#	Gel 4%	.21	100.80
1102	120#	Code 18a	.74	88.80
1118B	300#	Gel Flush	.21	63.00
5407	6.02 Tons	Tan Micoke Bulk Truck	m/c	350.00
4462	2	2 3/8 Tap Rubber Plug	28.00	56.00
5502C	4 hrs	80 bbl Vacuum Truck	90.00	360.00
1123	3000 gallons	CITY Water	16.50/1000	49.50
			Sub Total	4272.70
			SALES TAX 2.3%	173.30
			ESTIMATED TOTAL	4445.90

Rev'n 3737

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

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