

## Kansas Corporation Commission Oil & Gas Conservation Division

### 1110057

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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
☐ New Well ☐ Re-Entry ☐ Workover	Total Depth: Plug Back Total Depth:
☐ Oil         ☐ WSW         ☐ SIOW           ☐ Gas         ☐ D&A         ☐ ENHR         ☐ SIGW           ☐ OG         ☐ GSW         ☐ Temp. Abd.           ☐ CM (Coal Bed Methane)         ☐ Cathodic         ☐ Other (Core, Expl., etc.):	Amount of Surface Pipe Set and Cemented at: Feet  Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	·
Operator: Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Conv. to ENHR	Chloride content: ppm Fluid volume: bbls  Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec TwpS. R
☐ ENHR         Permit #:           ☐ GSW         Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date  Recompletion Date  Recompletion Date	

#### **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:							

Side Two



Operator Name:				Lease I	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	":					
<b>INSTRUCTIONS:</b> Shitime tool open and clorecovery, and flow rate line Logs surveyed. A	sed, flowing and shues if gas to surface te	t-in pressures st, along with	s, whether so final chart(s	hut-in pres	sure read	ched static level,	hydrostatic press	sures, bottom h	nole temp	erature, fluid
Drill Stem Tests Taken (Attach Additional S		Yes	☐ No			og Formatio	n (Top), Depth ar	nd Datum	;	Sample
Samples Sent to Geol	ogical Survey	Yes	No		Nam	е		Тор	[	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy		Yes Yes Yes	No No No							
List All E. Logs Run:										
		Report a		RECORD	Ne	w Used	ion, etc.			
Purpose of String	Size Hole Drilled	Size C Set (In		Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used		and Percent additives
			ADDITIONAL	CEMENTII	NG / SQL	    EEZE RECORD				
Purpose: Depth Type of Cement				# Sacks		LEZE RECORD	Type and I	Percent Additives		
Perforate Protect Casing	Top Bottom	71	··							
Plug Back TD Plug Off Zone										
Flug On Zone										
	PERFORATI	ON RECORD	- Bridge Plug	s Set/Type		Acid, Fra	cture, Shot, Cemen	t Saueeze Recor	d	
Shots Per Foot	Specify	Footage of Eac	h Interval Perf	forated			mount and Kind of Ma			Depth
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or EN	_	roducing Meth	nod:	ıg 🗌	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		ħ.	METHOD OF	COMPLE	TION:		PRODUCTION	ON INTER	VAL:
Vented Sold		Оре	n Hole	Perf.	Dually	Comp. Cor	nmingled			
(If vented, Sub			or (Specify)		(Submit A	ACO-5) (Sub	mit ACO-4)			

Operator License #: 30345 API #: 15-207-28421-00-00					
perator: Piqua Petro Inc. Lease: Hammond E					
Address: 1331 Xylan Rd Piqua, KS 66761	Well #: 13-12				
Phone: (620) 433-0099	Spud Date: 11-09-12 Completed: 11-12-12				
Contractor License: 32079 Location: NW-NE-SE-NE of 8-2					
T.D.: 1107 T.D. of Pipe: 1101	1490 Feet From North				
Surface Pipe Size: 7" Depth: 41'	500 Feet From East				
Kind of Well: Oil	County: Woodson				

# LOG

Thickness	Strata	From	To	Thickness	Strata	From	То
10	Soil/Clay	0	10	5	Lime	952	957
21	Shale	10	31	31	Shale	957	988
2	Lime	31	33	8	Lime	988	996
7	Shale	33	40	10	Shale	996	1006
3	Lime	40	43	15	Oil Sand/Bleed	1006	1021
168	Shale	43	211	7	Dark Sand/It bleed	1021	1028
56	Lime	211	267	23	Shale	1028	1051
14	Shale	267	281	1	Lime	1051	1052
202	Lime	281	483	3	Shale	1052	1055
4	Shale	483	487	2	Lime	1055	1057
3	Lime	487	490	1	Shale	1057	1058
8	Shale	490	498	13	Sand/ light bleed	1058	1071
2	Lime	498	500	36	Shale	1071	1107
44	Shale	500	544				
67	Lime	544	611				
9	Shale	611	620				1.5
4	Black Shale	620	624				
14	Lime	624	638				
4	Black Shale	638	642				
3	Lime	642	645				
189	Shale	645	854		The state of the s	100000000000000000000000000000000000000	
8	Lime	854	862		The state of the s	.,,	2001-25-24-20
58	Shale	862	920		T. D.		1107
2	Lime	920	922		T. D. of pipe		110
5	Shale	922	927		Miller company cons	75.0	1
6	Lime	927	933			ANGAR WHITE ETFORE	
3	Shale	933	936				
4	Lime	936	940				2
12	Shale	940	952			THE RESERVE THE PARTY OF THE PA	1

## Leis Oil Services, LLC

1410 150th Rd Yates Center, KS 66783

# Invoice

Number: 1001

Date: D

December 02, 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

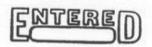
PO Number	Terms	Project
		Hammond E 3wells

Date	Description	Hours	Rate	Amount
11-9-12	Drill pit	100.00	1.00	100.00
11-9-12	Cement for surface	8.00	12.60	100.80
11-12-12	Drilling for Hammond E13-12	1,107.00	6.25	6,918.75
1-12-12	Drill pit	100.00	1.00	100.00
1-12-12	Cement for surface	8.00	12.60	100.80
1-13-12	Drilling for Hammond E 12-12	1,120.00	6.25	7,000.00
1-15-12	Drill pit	100.00	1.00	100.00
1-15-12	Cement for surface	8.00	12.60	100.80
1-16-12	Drilling for Hammond E 32-12	1,087.00	6.25	6,793.75
		Control Control		

Total \$21,314.90

0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$21,314.90	\$0.00	\$0.00	\$0.00	\$21,314.90





LOCATION FUREN

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

## FIELD TICKET & TREATMENT REPORT

020-431-9210	01 000-401-0010		CEIVIE				
DATE	CUSTOMER#	WELL NAME &	NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-15-12	4960	Hammand /	3-12				Woodson
CUSTOMER					24000000000000000000000000000000000000		
rique	RESS	η		TRUCK#	DRIVER	TRUCK#	DRIVER
				485	Alan M		
133	Xylan R	d.		515	merce		141
CITY		STATE ZIP COD	E				
Pign	ua.	KS 6676	1				
	ogstring O	HOLE SIZE 5 25	HOLE DE	PTH 1098	CASING SIZE & W	EIGHT	2
CASING DEPT	H_//01	DRILL PIPE	TUBING_	2 38		OTHER	A 3.5000000000 (2.50000000
		SLURRY VOL			CEMENT LEFT in C	CASING	
DISPLACEMEN	NT 64	DISPLACEMENT PSI 56	S MIX PSI	Jul 13007	RATE	ESTATE AND THE	
DEMARKS. C	- C m	ing: 8.7 up	- 22	- L'ne	Ro- V C:	00.1.1.7.10	n 1/1
79/11 /	apriline	Pump 300	100	2.11	L) - Gorb	L'ELE A	1000
10013 1	resh water	· rump soo	- GE F	143h * 50	15/-12/	waier.	WI X
MOSKE	6440 Paz	mix Coment	3/ 5 /	sal-seal, 4	60 001 311	To Caci	2
5. hui dow	n. Wash P	ump & Line. 5	Tuff 20	Jug. 1915	place w/	6.4166	2s Fresh
L. MTor	Final Oum	nine Proseure =	SOUT A	ump Plux	1300	5 but 4	rellin
with 10	J. Jugar	ob Complete.	Good C	ement Rat	um To Su	Mace	6331
TO PIT.	Tal	Complete Rig	down				
		,			2.000	unione very volument of the co-	zimmrauziku Silberu Reineriki
		Than	K Vou				
			.,				
ACCOUNT			DECORPTION	A CERVICES DI	CODUCT	LIBUT DDICE	TOTAL

ACCOUNT	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	,	PUMP CHARGE	1030.00	1030.00
5406	40	MILEAGE	4.00	160.00
1/31	1405ks	60/40002 min Cement	12.55	1757.00
1110 A	560D	Kol-Seal 5th posisk	146	257.60
111813	4800	Gel 420	.21	100.80
1202	1204	Caulz 120	.74	28.80
11/813	300₹	Gel Dush	.21	63.00
5407	6.92	Tonnilege Bulk Truck	me	350.00
4402	2	278 Top Rubber Plug	28.00	56.00
	v,			
			SubToTal	386320
	1	7.3%	SALES TAX	169.59
evin 3737	HA da la	054646	TOTAL	4032.79
AUTHORIZTION	12/1/1/1/0/6	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 for