



KANSAS CORPORATION COMMISSION 1159047
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 # _____

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

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: _____



1159047

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



1410 150th Rd. • Yates Center, Kansas 66783 • (620) 212-0752

843 Operator License #: 30345		API #: 15-207-28638-00-00	
Operator: Piqua Petro Inc.		Lease: Hammond E	
Address: 1331 Xylan Rd Piqua, KS 66761		Well #: 33-13	
Phone: (620) 433-0099		Spud Date: 8-2-13 Completed: 8-14-13	
Contractor License: 32079		Location: NE-NE-NW-NE of 8-24S-16E	
T.D. : 1121 T.D. of Pipe: 1118		170 Feet From North	
Surface Pipe Size: 7" Depth: 41'		1380 Feet From East	
Kind of Well: Oil		County: Woodson	

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
16	Soil/Clay	0	16	37	Shale	945	982
9	Lime	16	25	7	Lime	982	989
200	Shale	25	205	10	Shale	989	999
51	Lime	205	256	5	Lime	999	1004
19	Shale	256	275	2	Black Shale	1004	1006
121	Lime	275	396	12	Shale/Lime mix	1006	1018
8	Shale	396	404	16	Oil Sand	1018	1034
9	Lime	404	413	26	Shale	1034	1060
7	Shale	413	420	1	Lime	1060	1061
65	Lime	420	485	9	Oil Sand	1061	1070
5	Shale/Black Shale	485	490	51	Shale	1070	1121
3	Lime	490	493				
6	Shale	493	499				
4	Lime	499	503				
36	Shale	503	539				
75	Lime	539	614				
9	Shale/Black Shale	614	623				
21	Lime	623	644				
5	Shale/Black Shale	644	649				
23	Lime	649	672				
164	Shale	672	836		T.D.		1121
7	Lime	836	843		T.D. of pipe		1118
15	Shale	843	858				
10	Lime	858	868				
3	Black Shale	868	871				
56	Shale	871	927				
3	Lime	927	930				
5	Shale	930	935				
10	Lime	935	945				



Leis Oil Services, LLC

1410 150th Rd
Yates Center, KS 66783

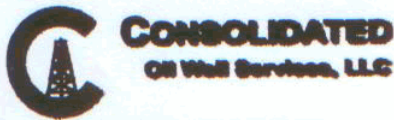
Invoice

Date	Invoice #
9/15/2013	1013

Bill To
Piqua Petro, Inc. 1331 Xylan Rd Piqua, KS 66761

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
1,119	Hammond E 45-13 8-16-13	6.25	6,993.75
10	Cement for Surface	11.60	116.00
1	Drill pit	100.00	100.00
1,121	Hammond E 33-13 8-14-13	6.25	7,006.25
10	Cement for surface	11.60	116.00
1	Drill pit	100.00	100.00
1,081	Wingrave 64-13 8-20-13	6.25	6,756.25
10	Cement for surface	11.60	116.00
1	Drill pit	100.00	100.00
1,112	Wingrave 65-13 8-23-13	6.25	6,950.00
10	cement for Surface	11.60	116.00
1	Drill pit	100.00	100.00
1,255	Sovoboda 37-13 9-2-13	6.25	7,843.75
1	Drill bit charge for Mississippi	600.00	600.00
1,237	Sovoboda 38-13 9-6-13	6.25	7,731.25
1	Drill bit charge for Mississippi	600.00	600.00
1	Drill pit	100.00	100.00
1,261	Little Kramer 1-13 9-10-13	6.25	7,881.25
1	Drill bit charge for mississippi	600.00	600.00
1	Drill pit	100.00	100.00
10	cement for surface	11.60	116.00
		<p>9/16/13 pd # 4401</p>	
		Total	\$54,142.50



ENTERED

TICKET NUMBER 43349
 LOCATION Eureka
 FOREMAN Steve Mead

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

FIELD TICKET & TREATMENT REPORT

CEMENT API 15-207-28638

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-15-13	4950	Hammond 33-13				Woodson
CUSTOMER Pigua Petroleum			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 1331 Xylan Rd			455	Allen B		
CITY Pigua			515	Colby		
STATE KS						
ZIP CODE 66761						

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 1122' CASING SIZE & WEIGHT _____
 CASING DEPTH 1115' DRILL PIPE _____ TUBING 2 3/8 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 6.7 bbls DISPLACEMENT PSI 400* Bump plug 1000* RATE _____

REMARKS: Safety Meeting: Rig up to 2 3/8 Tubing. Break circulation w/ Fresh Water. Pump 300* Gel Flush + 5 bbls Freshwater. Mix 145 sks 60/40 Pozmix Cement by 5" Kal-Seal, 4% Gel + 1% CaCl2. Shut down. Wash out Pump & Lines. Stuff 2 plugs. Displace with 6.7 bbls Fresh water. Final pumping Pressure 400* Bump Plug to 1000*. Shut well in 400*. Good Cement Returns to surface 6 bbl top 27. Job Complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00
5406	40	MILEAGE	4.20	168.00
1131	145 sks	60/40 Pozmix Cement	1318	1911.10
1110A	700*	Kal-Seal 5" per/sk	.46	322.00
1118B	470*	Gel 4%	.22	103.40
1102	120*	CaCl2 1%	.78	93.60
5407	6.02 Ton	Ton Mileage Bulk Truck	MSC	368.00
4402	2	2 3/8 Top Rubber Plug.	29.50	59.00
1118B	300*	Gel Flush	.22	66.00
			SubTotal	4176.10
			SALES TAX 2.15%	182.68
			ESTIMATED TOTAL	4358.78

Revin 3737

AUTHORIZATION Mato TITLE Steve Mead 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