



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1203722  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
August 2013

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
- Plug Back       Conv. to GSW       Conv. to Producer
- 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

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx)      (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1203722

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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  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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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)* \_\_\_\_\_

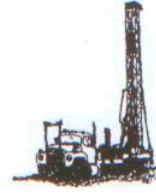
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# LEIS OIL SERVICES

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



<b>Operator License #:</b> 30345	<b>API #:</b> 15-207-28851-00-00
<b>Operator:</b> Piqua Petro, Inc.	<b>Lease:</b> Collins-Bennett
<b>Address:</b> 1331 Xylan Rd Piqua, KS 66761	<b>Well #:</b> 15-14
<b>Phone:</b> (620) 433-0099	<b>Spud Date:</b> 2-24-14 <b>Completed:</b> 2-25-14
<b>Contractor License:</b> 34036	<b>Location:</b> NW-SW-NW-NW of 16-25-17E
<b>T.D. :</b> 888 <b>T.D. of Pipe:</b> 883 <b>Size:</b> 2.875"	1660 <b>Feet From</b> South
<b>Surface Pipe Size:</b> 7" <b>Depth:</b> 22'	180 <b>Feet From</b> West
<b>Kind of Well:</b> Oil	<b>County:</b> Woodson

## LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
5	Soil/Clay	0	5	4	Shale	778	782
7	Broken Lime	5	12	2	Black Shale	782	784
114	Shale	12	126	6	Shale	784	790
35	Lime	126	161	4	Lime	790	794
9	Shale	161	170	29	Shale	794	823
51	Lime	170	221	5	Oil Sand	823	828
81	Shale	221	302	60	Shale	828	888
72	Lime	302	374				
6	Shale/Black Shale	374	380				
26	Lime	380	406				
5	Black Shale	406	411				
32	Lime	411	443				
152	Shale	443	595				
3	Lime	595	598				
21	Shale	598	619				
10	Lime	619	629				
68	Shale	629	697				
4	Lime	697	701				
8	Shale	701	709				
12	Lime	709	721				
5	Shale	721	726				
4	Lime	726	730				
2	Black Shale	730	732				
4	Shale	732	736				
3	Lime	736	739				
22	Shale	739	761				
3	Lime	761	764		<b>T.D.</b>		<b>888</b>
7	Shale	764	771		<b>T.D. of Pipe</b>		<b>883</b>
7	Lime	771	778				



**CONSOLIDATED**  
ON WELL SERVICES, LLC

266213

TICKET NUMBER 45844  
LOCATION Eureka, KS  
FOREMAN David Gardner

PO Box 884, Chanute, KS 66720  
320-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

API # N/A

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-27-14	4950	Collins Bennett #15-14				Woodson
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Pigua Petroleum			445	Chris B.		
MAILING ADDRESS			479	Seth V.		
1331 Xyland Rd.						
CITY	STATE	ZIP CODE				
Pigua	KS	666761				

JOB TYPE Longstring 0 HOLE SIZE 5 5/8" HOLE DEPTH 888' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH 882' DRILL PIPE \_\_\_\_\_ TUBING 2 7/8" OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.6# SLURRY VOL 32 Bbl WATER gal/sk 6.5 CEMENT LEFT in CASING 0  
 DISPLACEMENT 5.2 Bbl DISPLACEMENT PSI 300 ~~Rate~~ Plug 800 PSI RATE 1 BPM

REMARKS: Safety Meeting. Rig up to 2 7/8" tubing. Break circulation w/ 5 Bbl fresh water. Mixed 200# Gel Flush. 5 Bbl water spacer. Mixed 120 sks 60/40 Pozmix Cement w/ 4# Kol-seal /sk, 4% Gel, & 1% Cactz. @ 13.6#/gal. Shut down, washout pump & lines. Stuff 2 Plugs. Displace w/ 5.2 Bbl Fresh water. Final pumping pressure of 300 PSI. Bump plugs to 800 PSI. Shut well in. Good circulation @ all times. 6 Bbl good cement slurry to pit. Job complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00 ✓
5406	45	MILEAGE	4.20	189.00 ✓
1131	120 SKS	60/40 Pozmix Cement	13.18	1581.60 ✓
1110A	480#	Kol-seal @ 4#/sk	.46	220.80 ✓
1118B	410#	Gel @ 4%	.22	90.20 ✓
1102	105#	Cactz. @ 1%	.78	81.90 ✓
1118B	200#	Gel Flush	.22	44.00 ✓
5407	5.16 Tons	Ton Mileage Bulk Truck	M/C	368.00 ✓
5502C	2 HRS.	80 Bbl Vac. Truck	90.00/HR.	180.00 ✓
1123	3300 Gals.	City Water	17.30/1000	57.09 ✓
4402	2	2 7/8" Top Rubber Plug	29.50	59.00 ✓
		<input checked="" type="checkbox"/> completed	Subtotal	3956.59
		"Thank You"	7.15%	SALES TAX ESTIMATED TOTAL 152.63
				4109.22 ✓

Revin 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 for

Leis Oil Services, LLC

1410 150th Rd  
Yates Center, KS 66783

# Invoice

Date	Invoice #
3/22/2014	1020

<b>Bill To</b>
Piqua Petro, Inc. 1331 Xylan Rd Piqua, KS 66761

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
	Drilling- Hammond E 66-14	6.25	6,950.00
1	Drill Pits	100.00	100.00
10	Cement for Surface	11.60	116.00
	Drilling- Hammond E 67-14	6.25	6,931.25
1	Drill Pit	100.00	100.00
10	Cement for Surface	11.60	116.00
	Drilling- Hammond E 68-14	6.25	6,937.50
1	Drill Pit	100.00	100.00
10	Cement for Surface	11.60	116.00
	Drilling- Hammond E 69-14	6.25	6,893.75
1	Drill Pit	100.00	100.00
10	Cement for Surface	11.60	116.00
	Drilling- Collins Bennett 15-14	6.25	5,550.00
1	Drill Pit	100.00	100.00
* 8	Cement for Surface	11.60	92.80
	Drilling- Collins Bennett 16-14	6.25	7,562.50
1	Mississippi Drill Charge	600.00	600.00
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
	Drilling- Collins Bennett 17-14	6.25	5,518.75
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
	Drilling- Collins Bennett 18-14	6.25	5,556.25
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
	Drilling- Shannon 3-14	6.25	5,531.25
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
	Drilling- Shannon 4-14	6.25	7,543.75
1	Mississippi Drill Charge	600.00	600.00
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
	Drilling- Shannon 5-14	6.25	5,481.25
1	Drill Pit	100.00	100.00
		<b>Total</b>	



**CONSOLIDATED**  
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720  
620-481-9210 or 800-467-8676

3<sup>RD</sup> well

TICKET NUMBER 58020  
FIELD TICKET REF # 49035  
LOCATION Thayer  
FOREMAN Bohett Busby

**TREATMENT REPORT  
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-5-14		Collins-Bennett 15-14	16	25S	17E	WO

CUSTOMER Pigua Petro. Inc		
MAILING ADDRESS		
CITY	STATE	ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
476	Josh	679T102	Junior
490	Larry R		
478	Steve B		
521	Eric		
424	Wes		
618T95	Joe		

WELL DATA	
CASING SIZE	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE 2 7/8 8EUE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
8'22.5-28.5 (13)	Squirrel

TYPE OF TREATMENT Acidspot + frac
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CHEMICALS Biocide - Breaker Acid - Inhibitor - Stim Oil
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STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI
PAD	20	20			BREAKDOWN 1800
16-30 sand		20	1.5-1.0	300#	START PRESSURE
12-20 sand		20	1.0		END PRESSURE
12-20		20	1.5		BALL OFF PRESS
12-20		20	2.0	3700#	ROCK SALT PRESS
12-20 (2) + (2)		20-19	1.0		ISIP 675
12-20		19	1.0	1,500#	5 MIN
12-20 + (1)		19-18	1.0		10 MIN
12-20		18	1.5		15 MIN
12-20		18	2.0	1,500#	MIN RATE
FLUSH CASING	10	19			MAX RATE
Release balls to TD.			TOTAL	7,000#	DISPLACEMENT 4.9
OVERFLUSH	10	20	SAND		
TOTAL PBLS	160				

REMARKS:  
Spotted 75 gal - 15% HCL acid on perfs  
Blended 150 gal RAW HCL acid - OTF

Location 12:30PM - 1:15PM 40 miles

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE 3-5-14

Terms and Conditions are printed on reverse side.