

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1204269

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

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: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name	Top	Datum
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:					

<div style="text-align: center;"> CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used </div> <div style="text-align: center;"> Report all strings set-conductor, surface, intermediate, production, etc. </div>							
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 (Amount and Kind of Material Used)	Depth

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run:			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR.			Producing Method:						
			<input type="checkbox"/> Flowing	<input type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil	Bbbs.	Gas	Mcf	Water	Bbbs.	Gas-Oil Ratio	Gravity	

<p>DISPOSITION OF GAS:</p> <p><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease</p> <p><i>(If vented, Submit ACO-18.)</i></p>		<p>METHOD OF COMPLETION:</p> <p><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled</p> <p><i>(Submit ACO-5)</i></p> <p><input type="checkbox"/> Other <i>(Specify)</i> _____</p>	<p>PRODUCTION INTERVAL:</p> <p>_____</p> <p>_____</p>
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LEIS OIL SERVICES

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



Operator License #: 30345	API #: 15-001-30930-00-00
Operator: Piqua Petro, Inc.	Lease: Shannon
Address: 1331 Xylan Rd, Piqua, KS 66761	Well #: 6-14
Phone: (620) 433-0099	Spud Date: 3-18-14 Completed: 3-19-14
Contractor License: 34036	Location: SW-NW-NE-NW of 14-25-17E
T.D. : 872 T.D. of Pipe: 868 Size: 2.875"	500 Feet From North
Surface Pipe Size: 7" Depth: 22'	1650 Feet From West
Kind of Well: Oil	County: Allen

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
4	Soil and Clay	0	4	26	Shale	784	810
13	Lime	4	17	1	Lime	810	811
128	Shale	17	145	11	Oil Sand	811	822
83	Lime	145	228	3	Shale/some sand	822	825
41	Shale	228	269	47	Shale	825	872
6	Lime	269	275				
23	Shale	275	298				
69	Lime	298	367				
7	Shale/Black Shale	367	374				
28	Lime	374	402				
4	Black Shale	402	406				
33	Lime	406	439				
176	Shale	439	615				
11	Lime	615	626				
64	Shale	626	690		T.D. of Pipe		868
6	Lime	690	696		T.D.		872
5	Shale	696	701				
18	Lime	701	719				
6	Shale	719	725				
3	Lime	725	728				
2	Black Shale	728	730				
24	Shale	730	754				
4	Lime	754	758				
6	Shale	758	764				
7	Lime	764	771				
4	Shale	771	775				
3	Black Shale	775	778				
2	Shale	778	780				
4	Lime	780	784				



CONSOLIDATED
Oil Well Services, LLC

266709

TICKET NUMBER 45896

LOCATION Eureka

FOREMAN Steve Newell

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
3-19-14	4950	Shannon 6-14				Allen
CUSTOMER <u>Pigou Petroleum</u>						
MAILING ADDRESS <u>1331 Xylan Rd</u>						
CITY <u>Pigou</u>	STATE <u>Ks</u>	ZIP CODE <u>66761</u>				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			<u>485</u>	<u>Chris M</u>		
			<u>515</u>	<u>Colby</u>		
			<u>637</u>	<u>Jim</u>		

JOB TYPE <u>LLS</u>	HOLE SIZE	HOLE DEPTH <u>575'</u>	CASING SIZE & WEIGHT
CASING DEPTH <u>868'</u>	DRILL PIPE	TUBING <u>2 7/8</u>	OTHER
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT In CASING
DISPLACEMENT <u>5 bbls</u>	DISPLACEMENT PSI <u>500*</u>	<u>Bump plug 1100*</u>	RATE

REMARKS: Safety Meeting: Rig up to 2 7/8 Tubing. Break Circulation w/ Fresh Water Pump. 300* Gel Flush + 5 bbls water spacer. Mix 120 sks 60/40 pozmix Cement w/ 5* Kcl-seal, 4% Gel + 1% CaCl2. Shut down. Wash out Pump + Lines. Stuff 2 plugs. Displace w/ 5 bbls Fresh Water. Final pumping Pressure 500* Bump Plug 1100* Shut well in 500* Good cement Return to Surface. 5 bbl to pit. 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		MILEAGE <u>N/C</u>	-	- ✓
1131	120 sks	60/40 pozmix Cement	13.18	1581.60 ✓
1110A	600 F	5* Kcl-seal	.46	276.00 ✓
1118B	400*	4% Gel	.22	88.00 ✓
1102	100*	1% CaCl2	.78	78.00 ✓
1118B	300*	Gel Flush	.22	44.00 ✓
5407	5.16 Ton	Ton mileage Bulk Truck	mic	368.00 ✓
5502C	2 hr	80 bbl vacuum Truck	90.00	180.00 ✓
1123	2500 gallon	CITY water	17.39/1000	43.25 ✓
4402	2	2 7/8 Rubber Plug	29.50	59.00 ✓
		Subtotal		3802.85
		Cement + Chem.	30%	620.28
		<input checked="" type="checkbox"/> completed	2.40%	3182.57
		SALES TAX		114.67 ✓
		ESTIMATED TOTAL		3297.24

avln 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, LLC

1410 150th Rd
Yates Center, KS 66783

Invoice

Date	Invoice #
3/22/2014	1020

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

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
8	Cement for Surface	11.60	92.80
	Drilling- Shannon 6-14	6.25	5,450.00
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
	Drilling- Shannon 8-14	6.25	5,462.50
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
		65.00	520.00
		Total	\$85,687.95