



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1215870
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: _____

1215870

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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 <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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> _____	PRODUCTION INTERVAL: _____ _____
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Leis Oil Services, LLC

1410 150th Rd
Yates Center, KS 66783

Invoice

Date	Invoice #
6/1/2014	1026

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

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
1,238	Drilling Diebolt 6-14	6.25	7,737.50
1	Mississippi Bit Charge	600.00	600.00
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
878	Drilling Shannon 13-14	6.25	5,487.50
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
874	Drilling Shannon 12-14	6.25	5,462.50
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
879	Drilling Shannon 14-14	6.25	5,493.75
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
865	Shannon 15-14	6.25	5,406.25
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
1,222	Diebolt 7-14	6.25	7,637.50
1	Mississippi Bit Charge	600.00	600.00
1	Drill Pit	100.00	100.00
8	Cement for Surface	11.60	92.80
3	Making crossing through stream on Diebolt (3hours)	45.00	135.00
Total			\$39,909.60

FED ID # 48-1214033
 Shop # (620) 437-2661
 Cellular # (620) 437-7582
 Office # (316) 303-9515
 Office Fax # (316) 263-0432

Hurricane Services, Inc.
Cementing & Circulating Division
 250 N. Water, Suite 200
 Wichita, KS 67202

MC ID# 165290

Shop Address: 3613A Y Road
 Madison, KS 66860

Customer:
 PIQUA PETRO, INC.
 1331 XYLAND RD
 PIQUA, KS 66761

Invoice Date: 6/4/2014
 Invoice #: 0013568
 Lease Name: SHANNON
 Well #: 15-14
 County: ALLEN

Date/Description	HRS/QTY	Rate	Total
See ticket 100489 of BB	1.000	790.000	790.00
Mileage	35.000	3.250	113.75
Cement Pozmix 60/40	118.000	12.000	1,416.00 T
Gel 2%	200.000	0.300	60.00 T
Flocele	30.000	2.150	64.50 T
Gel flush	150.000	0.300	45.00 T
Vac truck #105	3.000	84.000	252.00
Vac truck #106	3.000	84.000	252.00
Bulk truck #202	1.000	300.000	300.00
Top rubber plug 2 7/8"	1.000	25.000	25.00 T
Fuel surcharge	1.000	165.920	165.92 T

Net Invoice 3,484.17
 Sales Tax: (7.40%) 131.46
Total 3,615.63

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!



LEIS OIL SERVICES

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



Operator License #: 30345	API #: 15-001-31093-00-00
Operator: Piqua Petro, Inc.	Lease: Shannon
Address: 1331 Xylan Rd, Piqua, KS 66761	Well #: 15-14
Phone: (620) 433-0099	Spud Date: 5-28-14 Completed: 6-2-14
Contractor License: 34036	Location: SE/NW/NW of 14-25-17E
T.D. : 865 T.D. of Pipe: 857 Size: 2.875"	1170 Feet From North
Surface Pipe Size: 7" Depth: 22'	1000 Feet From West
Kind of Well: Oil	County: Allen

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
4	Soil	0	4	30	Shale	768	798
5	Clay	4	9	2	Lime Streaks	798	800
125	Shale	9	134	10	Oil Sand	800	810
19	Lime	134	153	55	Shale	810	865
25	Shale	153	178				
40	Lime	178	218				
17	Shale	218	235				
20	Lime	235	255				
34	Shale	255	289				
74	Lime	289	363				
5	Shale/Black Shale	363	368				
66	Lime	368	434				
183	Shale	434	617				
8	Lime	617	625				
52	Shale	625	677		T.D. of Pipe		865
5	Lime	677	682		T.D.		857
4	Shale	682	686				
23	Broken Lime	686	709				
3	Shale	709	712				
4	Lime	712	716				
2	Black Shale	716	718				
23	Shale	718	741				
4	Lime	741	745				
4	Shale	745	749				
6	Lime	749	755				
4	Shale	755	759				
3	Black Shale	759	762				
2	Shale	762	764				
4	Lime	764	768				

3613A Y Road
Madison, KS 66860
Ph: 620-437-2661
Fax: 620-437-2881



HURRICANE SERVICES INC

104 Prairie Plaza Parkway
Garnett, KS 66032
Ph: 785-448-3100
Fax: 785-448-3102

FED ID# 48-1214033
MC ID# 165290

Remit to: Hurricane Services, Inc.
250 N. Water, Suite 200
Wichita, KS 67202

Customer:

PIQUA PETRO, INC.
1331 XYLAND RD
PIQUA, KS 66761

Invoice Date: 6/18/2014
Invoice #: 0013685
Lease Name: SHANNON
Well #: 15-14
County: ALLEN

Date/Description	HRS/QTY	Rate	Total
See ticket 1210 of ZH	1.000	2,280.000	2,280.00
15% Acid	100.000	1.950	195.00
NE-320	0.250	23.900	5.98
KCL	7.000	26.300	184.10
Biocide	3.000	38.000	114.00
Progum 3 Gel	130.000	8.000	1,040.00
LEB breaker	0.250	162.000	40.50
Ball sealers 7/8"	3.000	1.750	5.25
Fracing Ball gun	1.000	50.000	50.00
Mileage	40.000	3.250	130.00
Acid spotter #310	1.000	300.000	300.00
Sand truck 820	0.500	500.000	250.00
Transport #146	2.000	105.000	210.00
Transport #148	2.000	105.000	210.00
Transport #144	2.000	105.000	210.00
20/40 Frac Sand	500.000	0.250	125.00
12/20 Frac Sand	5,500.000	0.270	1,485.00
BID PRICE	0.000	0.000	0.00

Total 6,834.83

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