

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1223106

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

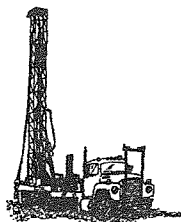
ALT ☐ I ☐ II ☐ III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_



Form	ACO1 - Well Completion
Operator	Daystar Petroleum, Inc.
Well Name	Town 4-12
Doc ID	1223106

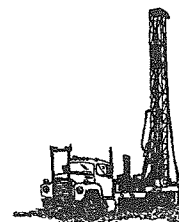
#### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
SURFACE	12	7	20	41	REGULAR	8	
PRODUC TION	5.625	2.875	6.5	1353	60/40 POZ, OWC	150	



# LEIS OIL SERVICES

111 East Mary • Yates Center, Kansas 66783 • (620) 625-3676



<b>Operator License #:</b> 30345	<b>API #:</b> 15-207-28268-00-00
<b>Operator:</b> Piqua Petro, Inc.	<b>Lease:</b> Town
<b>Address:</b> PO Box 223 Yates Center, KS 66783	<b>Well #:</b> 4-12
<b>Phone:</b> (620) 433-0099	<b>Spud Date:</b> 8/22/12 <b>Completed:</b> 8/23/12
<b>Contractor License:</b> 32079	<b>Location:</b> SW-NE-NE-NW    of    31-25-14E
<b>T.D. :</b> 1357 <b>T.D. of Pipe:</b> 1353	510 <b>Feet From</b> North
<b>Surface Pipe Size:</b> 7" <b>Depth:</b> 41'	2130 <b>Feet From</b> West
<b>Kind of Well:</b> Oil	<b>County:</b> Woodson

## LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
20	Soil/Clay	0	20	3	Lime	1086	1089
1	Lime	20	21	20	Shale	1089	1109
116	Shale	21	137	18	Lime	1109	1127
3	Lime	137	140	8	Shale	1127	1135
5	Shale	140	145	6	Lime	1135	1141
4	Lime	145	149	66	Shale	1141	1207
165	Shale	149	314	3	Lime	1207	1210
5	Lime	314	319	10	Shale	1210	1220
8	Shale	319	327	2	Lime	1220	1222
102	Lime	327	429	80	Shale	1222	1302
3	Shale	429	432	5	Sandy Shale	1302	1307
72	Lime	432	504	5	Sand light odor	1307	1312
25	Shale	504	529	5	Sand odor bleed	1312	1317
57	Lime	529	586	36	Shale	1317	1353
60	Shale	586	646				
80	Lime	646	726				
4	Black Shale	726	730				
4	Lime	730	734				
8	Lime/ oil show	734	742				
54	Lime	742	796				
145	Shale	796	941				
8	Lime	941	949				
24	Shale	949	973				
9	Lime	973	982		<b>T.D.</b>		<b>1357</b>
79	Shale	982	1061		<b>T.D. of Pipe</b>		<b>1353</b>
4	Lime	1061	1065				
12	Shale	1065	1077				
2	Lime	1077	1079				
7	Shale	1079	1086				



**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 37800  
LOCATION Eureka  
FOREMAN Steve Mead

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
8-24-12	4960	Town 4-12				Woodson
CUSTOMER <u>Piqua Petroleum</u>						
MAILING ADDRESS <u>1331 Xylan Rd</u>						
CITY <u>Piqua</u>	STATE <u>KS</u>	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
			485	Alanm		
			479	Marla		
			611	Joey		
			637	Jim		

JOB TYPE Longstring HOLE SIZE \_\_\_\_\_ HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT \_\_\_\_\_  
CASING DEPTH 1355' DRILL PIPE \_\_\_\_\_ TUBING 2 3/8 OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
DISPLACEMENT 7.85 bbls DISPLACEMENT PSI 700\* <sup>Bump</sup> MIX PSI plug 1300\* RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up To 2 3/8 Tubing. Break Circulation w/ Fresh water.  
Pump 500\* Gel Flush & 2 bbls Freshwater spacer. Mix 100 sks 60/40 pozmix  
Cement w/ 6% Gel + 1\* phenoseal per/sk. Tail in with 50 sks GWC Cement  
w/ 5\* Kal-Seal + 1\* phenoseal per/sk. Shut down. Washout pump & lines.  
Stuff 2 plugs Displace with 7.85 bbls Freshwater. Final pumping Pressure  
700\* Bump Plugs To 1200\*. Shut well in 500\*. Good Cement To Surface  
2 bbls Tap it. Job Complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	20	MILEAGE	4.00	80.00
1131	100 sks	60/40 pozmix Cement	12.55	1255.00
1118 B	500*	6% Gel	.21	105.00
1107 A	100*	1* phenoseal per/sk	1.29	129.00
1126	50 sks	GWC Cement	18.80	940.00
1118 A	250*	Kal Seal 5* per/sk	1.46	115.00
1107 A	50 sks	1* phenoseal per/sk	1.29	64.50
1118 B	500*	Gel Flush	.21	105.00
5407	6.9 Tons	Ton mileage Bulk Truck	MIC	350.00
4402	2	2 3/8 Tap Rubber Plug	28.00	56.00
5502 C	3 hrs	8000 vacuum Truck	90.00	270.00
1123	3000 gallons	CITY water	16.50	49.50
			SubTotal	4549.00
			SALES TAX 7.32%	205.81
			ESTIMATED TOTAL	4754.81

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 form.