



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1237751
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
-----------------------------------	-----------------	---

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: _____



1237751

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
--	---

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

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
--	---	---



LEIS OIL SERVICES



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

Operator License #: 30345	API #: 15-207-28900-00-00
Operator: Piqua Petro, Inc.	Lease: Diebolt
Address: 1331 Xylan Rd Piqua, KS 66761	Well #: 7-14
Phone: (620) 433-0099	Spud Date: 06-03-14 Completed: 06-04-14
Contractor License: 34036	Location: NE-NW-SE-SE of 15-24-17E
T.D. : 1222 T.D. of Pipe: 1219 Size: 2.875"	1200 Feet From South
Surface Pipe Size: 7" Depth: 22'	4350 Feet From West
Kind of Well: Oil	County: Woodson

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
4	Soil/Clay	0	4	3	Black Shale	788	791
1	Shale	4	5	5	Shale	791	796
20	Lime	5	25	3	Lime	796	799
115	Shale	25	140	366	Shale	799	1165
15	Lime	140	155	1	Coal	1165	1166
9	Shale/Coal	155	164	4	Shale	1166	1170
81	Lime	164	245	8	Lime	1170	1178
69	Shale	245	314	4	Oil Break	1178	1182
70	Lime	314	384	40	Lime	1182	1222
9	Shale/Black Shale	384	393				
21	Lime	393	414				
4	Shale/Black Shale	414	418				
24	Lime	418	442				
166	Shale	442	608				
8	Lime	608	616				
15	Shale	616	631				
10	Lime	631	641				
67	Shale	641	708				
3	Lime	708	711				
4	Shale	711	715				
12	Lime	715	727				
10	Shale	727	737				
4	Lime	737	741		T.D.		1222
2	Black Shale	741	743		T.D. of Pipe		1219
14	Shale	743	757				
15	Lime	757	772				
6	Shale	772	778				
7	Lime	778	785				
3	Shale	785	788				

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



Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
10/01/14	49685

Greg Lair
Piqua Petro
1331 Xylan Road
Piqua, KS 66761

Diebolt - North Well
Woodson County
7-14

Terms	Due Date

Description	Qty	Rate	Amount
Pulling Unit 9/25/14 Run pipe in. Set up to wash	1	100.00	100.00T
Pulling Unit Pump cement, pull half of pipe. Fill to surface. Pull rest of pipe and wash clean.	2.5	100.00	250.00T
Pump Charge	1	500.00	500.00T
Vacuum Truck	2.5	85.00	212.50T
Cement	112	10.00	1,120.00T
Sales Tax		7.15%	156.05

Total	\$2,338.55
Payments/Credits	\$0.00
Balance Due	\$2,338.55