

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

Handwritten initials and date: 3/13/09

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30345

Name: PIQUA PETRO, INC.

Address 1: 1331 XLAN RD

Address 2: _____

City: PIQUA State: KS Zip: 66761 + _____

Contact Person: GREG LAIR

Phone: (620) 433-0099

CONTRACTOR: License # 33557

Name: SKYY DRILLING, INC

Wellsite Geologist: DAVID B. GRIFFIN

Purchaser: MACLASKEY

Designate Type of Completion:

New Well Re-Entry Workover

Oil SWD SLOW

Gas ENHR SIGW

CM (Coal Bed Methane) Temp. Abd.

Dry Other _____

(Core, WSW, Expl., Cathodic, 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: _____ Plug Back Total Depth _____

Commingled Docket No.: _____

Dual Completion Docket No.: _____

Other (SWD or Enhr.?) Docket No.: _____

12/06/08 12/14/08 12/15/08

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 197-20280-0000

Spot Description: _____

NW SW SE NE Sec. 2 Twp. 13 S. R. 10 East West

3250 Feet from North / South Line of Section

1100 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: WABAUNSEE

Lease Name: THOWE D NORTH Well #: 04-08

Field Name: MILL CREEK

Producing Formation: VIOLA

Elevation: Ground: 1100 Kelly Bushing: _____

Total Depth: 3050 Plug Back Total Depth: 3050

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 AH I NR 4-3-09
(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 No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: [Signature]

Title: PRESIDENT Date: March 13, 2009

Subscribed and sworn to before me this 13th day of March

20 09

Notary Public: Brenda L. Morris

Date Commission Expires: May 2010

BRENDA L. MORRIS
Notary Public - State of Kansas
My Appt. Expires 5-20-10

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED
MAR 16 2009

KCC WICHITA

Operator Name: PIQUA PETRO, INC. Lease Name: THOWE D NORTH Well #: 04-08
 Sec. 2 Twp. 13 S. R. 10 East West County: WABAUNSEE

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> 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 checked="" 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
SURFACE	12 1/4	8 5/8		315	CLASS A	165	3% CACLZ, 2% GEL

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

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

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KCC WICHITA

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 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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Surface



CONSOLIDATED
OIL FIELD SERVICES, LLC



ENTERED

TICKET NUMBER 20680

LOCATION Frank

FOREMAN Troy Shaffer

PO Box 884, Chanute, KS 66720
820-431-8210 or 800-467-8678

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-8-08	4950	Thawe D. North # 04-02				
CUSTOMER Pigna Petroleum / Greg Lein			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 1331 Xylon Rd.			520	Cliff		
CITY Pigna			515	Terrid		
STATE KS		ZIP CODE				

JOB TYPE SIP HOLE SIZE 12 1/4" HOLE DEPTH 316' CASING SIZE & WEIGHT 2 3/4"
 CASING DEPTH 315 k.f. DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8" SLURRY VOL. 42 cu WATER gal/sk 65" CEMENT LEFT IN CASING 80'
 DISPLACEMENT 18.7861 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting Rig up to 850' casing. Break circulation w/ water.
Mixed 165 lbs/sk Class A Cement w/ 3% Cacl2, 2% Gel + 1/4" / 150 lbs @
14.8" gal. Displace w/ 18.7861 water. Shut casing in w/ Good Cement
to surface = 10 cu slurry to pit.
Job Complete

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE	725.00	725.00
5406	90	MILEAGE	3.65	328.50
1104S	165 sks	Class A Cement	13.50	2227.50
1102	465"	Cacl2 3%	.75	348.75
1118A	310"	Gel 2%	.17	52.70
5407A	7.75 hrs	Trk - Mileage	1.20	930.00
			RECEIVED	
			MAR 16 2009	
			KCC WICHITA	
			546 Total	4519.45
			SALES TAX	178.77
			ESTIMATED	
			TOTAL	4698.22

Rev'n 3737

AUTHORIZATION Called by Ben Harold

301919
TITLE SKYY Atty.

DATE _____