

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30345
Name: Piqua Petro, Inc.
Address 1: 1331 Xylan Rd
Address 2: _____
City: Piqua State: KS Zip: 66761 + _____
Contact Person: Greg Lair
Phone: (620) 433-0099
CONTRACTOR: License # 33557
Name: Sky Drilling LLC
Wellsite Geologist: _____
Purchaser: Maclaskey
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover
 Oil _____ SWD _____ SIOW
_____ 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.: _____
12/27/08 01/11/09 01/22/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 197-20281-0000
Spot Description: _____
NE SW SW Sec. 11 Twp. 13 S. R. 10 East West
1290 Feet from North / South Line of Section
4300 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Wabaunsee
Lease Name: Stuwe Well #: 03-08
Field Name: Mill Creek
Producing Formation: Simpson
Elevation: Ground: 1233 Kelly Bushing: _____
Total Depth: 3265 Plug Back Total Depth: 3257
Amount of Surface Pipe Set and Cemented at: 316 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/ AIT-1-Dig - 4/6/09 ^{sq gmt}

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 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: 3-2-09
Subscribed and sworn to before me this 2nd day of March
2009
Notary Public: Brenda L. Morris
Date Commission Expires: May 20, 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

KANSAS CORPORATION COMMISSION

MAR 04 2009

RECEIVED

Operator Name: Piqua Petro, Inc. Lease Name: Stuewe Well #: 03-08
 Sec. 11 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 type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray/ Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
---	---

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		316	class A	165	3%caclz, 2%gel
Longstring	7 7/8	5 1/2		3257	class A	200	

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				

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
4	perf from 3213.75 to 3219.25 w/ 23 shots		

KANSAS CORPORATION COMMISSION
MAR 04 2009
RECEIVED

TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>1390</u> Packer At: _____ Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>1/22/09</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls. <u>1</u> Gas Mcf _____ Water Bbls. <u>1:1</u> Gas-Oil Ratio _____ Gravity <u>30</u>

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



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 20727
LOCATION Europe
FOREMAN Troy Strickler

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
1-4-09	4950	Stevwe 03-08				Greene
CUSTOMER Piqua Petroleum, Inc.			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 1371 Xylar Rd.			520	Cliff		
CITY Piqua	STATE KS	ZIP CODE 66761	543	Dave		
			487	Chris		

JOB TYPE Surface HOLE SIZE 12 1/4" HOLE DEPTH 320' CASING SIZE & WEIGHT 2 3/8"
CASING DEPTH 312' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 15" SLURRY VOL _____ WATER gal/sk 65" CEMENT LEFT in CASING 20"
DISPLACEMENT 18.5 Bl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 8 5/8" casing. Break circulation w/ 5 Bl water.
Mixed 165sk Class A Cement w/ 3% Cacl₂, 2% Gel, 1/4" / Floccle @
15" / gal. Displace w/ 18.5 Bl water. Shut casing in w/ Good Cement
to surface - 10 Bl slurry to Pit.
Job Complete

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
5406	90	MILEAGE	3.65	328.50
11045	165sk	Class A Cement	13.50	2227.50
1102	465"	3% Cacl ₂	.75	348.75
1107	40"	1/4" / Floccle	2.10	84.00
1118A	310"	2% Gel	.17	52.70
5407A	7.25 Ton	Ton Mileage	1.20	877.00
5502C	9hrs	80 Bl Vac Truck (4hrs for Cement Job. 5hrs for 4 loads water Hauled to Pits.)	85.00	765.00
		Thank U!		
			Sub Total	5262.95
			SALES TAX	177.69
			ESTIMATED TOTAL	5440.64

KANSAS CORPORATION COMMISSION
MAR 04 2009
RECEIVED

Form 3737

AUTHORIZATION called by Ben Harold

TITLE Skyp Dip

DATE _____

208289



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 20766
LOCATION FLACKS
FOREMAN Rex Lott

PO Box 884, Chanute, KS 66720
620-431-8210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
1-12-09	4950	Steuwe 08-08																				
CUSTOMER Steuwe Pigou Petroleum Inc.			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>463</td> <td>Shannon</td> <td></td> <td></td> </tr> <tr> <td>515</td> <td>Chris</td> <td></td> <td></td> </tr> <tr> <td>452/7103</td> <td>Jim</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	463	Shannon			515	Chris			452/7103	Jim		
TRUCK #	DRIVER	TRUCK #					DRIVER															
463	Shannon																					
515	Chris																					
452/7103	Jim																					
MAILING ADDRESS 1331 Xylan Rd																						
CITY Piqua	STATE KS	ZIP CODE 66261																				

JOB TYPE logstring HOLE SIZE 7 7/8" HOLE DEPTH 3265' CASING SIZE & WEIGHT 5 1/2"
CASING DEPTH 3260' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 15" SLURRY VOL 55 bbl WATER gal/sk _____ CEMENT LEFT IN CASING 0'
DISPLACEMENT 7 7/8 @ 1 DISPLACEMENT PSI 700 PSI 1200 RATE _____

REMARKS: Safety meeting- Rig up to 5 1/2" casing Break circulation w/ 5 bbl fresh water. Pump 6 hrs salt flush, 10 bbl water spacer. Mixed 200 sacks class 'A' cement w/ 5" Kal-seal #1/4", 10% salt, 1/2% CE-10 + 1/2% CAZ-32 @ 15" @ 100 gal. yield 1.55. Washout pump + lines, shut down, release plug. Displace w/ 7 7/8 bbl fresh water. Final pump pressure 700 psi. Bump plug to 1200 psi. wait 2 minutes, release pressure float head. Good circulation @ all times while cementing. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	825.00	825.00
5406	90	MILEAGE	3.65	328.50
11043	200 sacks	class 'A' cement	13.50	2700.00
1108A	1000'	5" Kal-seal #1/4"	.48	480.00
1111	200'	10% SALT	.33	277.00
1135	50'	1/2% CE-10	2.50	325.00
1146	50'	1/2% CAZ-32	2.20	385.00
1111	300'	salt pre-flush	.33	99.00
5402A	9.9	ten-mileage bulk tr	1.20	1615.20
5501C	6 hrs	water transport	112.00	672.00
1123	5500 gals	city water	14.00/1000	77.00
4159	1	5 1/2" AFU float shoe	322.00	322.00
4104	1	5 1/2" cement basket	219.00	219.00
4130	4	5 1/2" centralizers	46.00	184.00
4406	1	5 1/2" top rubber plug	101.00	101.00
			Subtotal	888.20
			SALES TAX	340.76
			ESTIMATED TOTAL	8435.56

KANSAS CORPORATION CO/MISSION
MAR 04 2009
RECEIVED

L.B.T.

268361

Revin 3737

AUTHORIZATION Witnessed by Ben Hamill

TITLE Tolpelo / Sany D&G

DATE _____