

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 30345
Name: PIQUA PETRO INC.
Address: 1331 XLAN RD
City/State/Zip: PIQUA, KS 66761
Purchaser: MACLASKEY
Operator Contact Person: GREG LAIR

Phone: (620) 433-0099
Contractor: Name: LITTLE JOE OIL COMPANY
License: 30638

Wellsite Geologist: N/A

Designate Type of Completion:

☒ New Well ☐ Re-Entry ☐ Workover
☒ Oil ☐ SWD ☐ SLOW ☐ Temp. Abd.
☐ Gas ☐ ENHR ☐ SIGW
☐ 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./SWD

☐ Plug Back ☐ Plug Back Total Depth

☐ Commingled ☐ Docket No. _____

☐ Dual Completion ☐ Docket No. _____

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

<u>10/9/04</u>	<u>10/14/04</u>	<u>11/23/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 207-26867-00-00

County: WOODSON

SE SW SW Sec. 3 Twp. 24 S. R. 17 ☒ East ☐ West

175 feet from S / N (circle one) Line of Section

700 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Base Name: Sovoboda Well #: 21-04

Field Name: Neosho Falls- Leroy

Producing Formation: Mississippi

Stratigraphic Unit: Ground: N/A Kelly Bushing: N/A

Total Depth: 1260 Plug Back Total Depth: 1241

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from SURFACE

feet depth to 1260 w/ 185 sx cmt.

Drilling Fluid Management Plan Air II NCR 7-25-08
(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: [Signature] Date: 5/20/05

Subscribed and sworn to before me this 20th day of May

2005

Notary Public: Joni Y. Thummel

Date Commission Expires: March 14, 2006

KCC Office Use ONLY

☐ Letter of Confidentiality Received

If Denied, Yes ☐ Date: _____

☐ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution



Joni Y. Thummel
Notary Public - State of Kansas
My Appt. Expires 3/14/06

Operator Name: PIQUA PETRO INC. Lease Name: Sovoboda Well #: 21-04
 Sec. 3 Twp. 24 S. R. 17 ☒ East ☐ West County: WOODSON

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 ☐ Yes ☒ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum

RECEIVED
 MAY 25 2005
 KCC WICHITA

CASING RECORD ☐ New ☐ 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 IN	7 IN	USED	20 FT	PORTLAND	15	
LONG STING	5 7/8	2 7/8	USED	1260	60/40 POZ	185	

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 (Amount and Kind of Material Used)	Depth
2	1198-1202	500 gallons HCl 15% w/ company tools	1198-1202

TUBING RECORD		Size	Set At	Packer At	Liner Run	
2 7/8			1260		☐ Yes ☒ No	
Date of First, Resumerd Production, SWD or Enhr.			Producing Method			
11/23/04			☐ Flowing ☒ Pumping ☐ Gas Lift ☐ Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.
	1				1	
					Gas-Oil Ratio	Gravity
					1:1	32

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☒ Used on Lease
 (If vented, Submit ACO-18.)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____

TICKET NUMBER 3198
LOCATION FOOT LOCKER
FOREMAN REAR FLOOR

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/30/09	4436	SWORD, A 21-09				Woodson
CUSTOMER Pryor Petroleum, Inc.						
MAILING ADDRESS 1331 S. K. Rd.			TRUCK #	DRIVER	TRUCK #	DRIVER
			446	K. K.		
			441	Stacy		
CITY	STATE	ZIP CODE	431	Tim		
Pryor	Ks	64511	436	Alan		

Thank you

RECEIVED

ESTIMATED TOTAL	3507.00
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AUTHORIZATION *100-1-100-100-100-100* TITLE *200-1-100-100-100-100* DATE *100-1-100-100-100-100*