

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

ORIGINAL

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 # 32079

Name: Leis Oil Services, LLC

Wellsite Geologist: _____

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.: _____

5/18/09 5/18/09 6/15/09

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

API No. 15-207-27485-0000

Spot Description: _____

SE SE NW SW Sec. 16 Twp. 24 S. R. 16 East West

1350 Feet from North / South Line of Section

1080 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Woodson

Lease Name: Wingrave Well #: 25-09

Field Name: Vernon

Producing Formation: Squirrel

Elevation: Ground: n/a Kelly Bushing: _____

Total Depth: 1112 Plug Back Total Depth: 1106

Amount of Surface Pipe Set and Cemented at: 40 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 1106

feet depth to: surface w/ 157

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.: _____

Alt 2 - Dig. 7/31/09

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: _____

Title: President Date: July 20, 2009

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

20 09

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

Operator Name: Piqua Petro, Inc. Lease Name: Wingrave Well #: 25-09
 Sec. 16 Twp. 24 S. R. 16 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: <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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name: _____ Top: _____ Datum: _____
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Gamma Ray/Neutron

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"	7"		40'	Regular	8	
Longstring	6 1/4"	2 7/8"	6.5#	1106	60/40 Pozmix	157	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 (Amount and Kind of Material Used)	Depth
1	11 shots from 1050 to 1060	75 gal 15% HCL,	

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TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		KCC WICHITA	
Date of First, Resumed Production, SWD or Enhr. 6/15/09		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. 1	Gas Mcf	Water Bbls. 1
			Gas-Oil Ratio 32

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: _____ _____
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IC ID # 165290
 Shop # 620 437-2661
 Cellular # 620 437-7582
 Office # 316 685-5908
 Office Fax # 316-685-5926
 Shop Address: 3313A Y Road
 Madison, KS 66860

Hurricane Services, Inc.
 P.O. Box 782228
 Wichita, KS 67278-2228

Cement, Acid or Tools
 Service Ticket
 3138

DATE 5-21-09

COUNTY Woodson CITY _____

CHARGE TO Pigua Petro, Inc
 ADDRESS 1331 Xylao Road CITY Pigua ST Ks. ZIP _____
 LEASE & WELL NO. Wingrave #25-09 CONTRACTOR John Leis
 KIND OF JOB Longstring SEC. _____ TWP. _____ RNG. _____
 DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge
		700.00
157 SKS	60/40 Pozmix cement	1624.95
270 lbs	Gel 2%	67.50
100 lbs	Gel > Flush Ahead	25.00
4 Hrs	Water Truck	320.00
	BULK CHARGE	
6.9 Tons	BULK TRK. MILES > minimum charge	225.00
	PUMP TRK. MILES	N/C
1	PLUGS 2 7/8" Top Rubber	17.00
		6.3% SALES TAX
		109.27
	<u>As Bid</u>	TOTAL
		3088.72

T.D. 1112 CSG. SET AT _____ VOLUME _____
 SIZE HOLE _____ TBG SET AT 1105 VOLUME 6.4 Bbls
 MAX. PRESS. _____ SIZE PIPE 2 7/8" - 8'ld
 PLUG DEPTH _____ PKER DEPTH _____
 PLUG USED _____ TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, Break circulation with fresh water, 5 Bbl. Gel Flush, followed with 20 Bbls water, Mixed 157 SKS 60/40 Pozmix cement w/ 2% Gel. Shut down - washout Pump and lines - Release Plug - Displace Plug with 6 1/2 Bbls water. Final Pumping @ 500 PSI - Pumped Plug To 1200 PSI - close Tubing w/ 1200 PSI. Good cement returns to Surface w/ 6 Bbl. slurry

EQUIPMENT USED

NAME <u>Kelly Kimberlin</u> UNIT NO. <u>185</u>	NAME <u>Jerry #91, Jason #94</u> UNIT NO. _____
<u>Brad Butler</u> HSI REP.	<u>Called by Greg Lair</u> OWNER'S REP.

Leis Oil Services, LLC

111 E. Mary
Yates Center, KS 66783

Invoice

Number: 1031

Date: May 22, 2009

Bill To:

Greg Lair
Piqua Petro
1331 Xylan Rd
Piqua, KS 66761

Ship To:

Greg Lair
Piqua Petro
1331 Xylan Rd
Piqua, KS 66761

PO Number	Terms	Project
		Wingrave 25-09

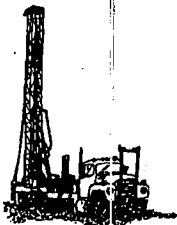
Date	Description	Hours	Rate	Amount
05-19-09	Wingrave 25-09	1,112.00	5.25	5,838.00
05-15-09	Cement for Surface	8.00	12.00	96.00

fd \$5934
#11737
5/26/09

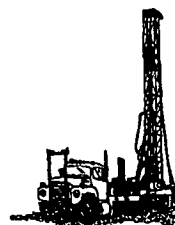
Total

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0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$11,706.00	\$0.00	\$0.00	\$0.00	\$11,706.00



LEIS OIL SERVICES



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

Operator License #: 30345	API #: 207-27485-0000
Operator: Piqua Petro, Inc.	Lease: Wingrave
Address: 1331 Xylan Rd Piqua, KS 66761	Well #: 25-09
Phone: 620.433.0099	Spud Date: 05.18.09 Completed: 05.18.09
Contractor License: 32079	Location: SE-SE-NW-SW of 16-24-16E
T.D. : 1112 T.D. of Pipe: 1106	1350 Feet From South
Surface Pipe Size: 7" Depth: 43'	1080 Feet From West
Kind of Well: Oil	County: Woodson

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
6	Soil and Clay	0	6	5	Lime	961	966
2	Lime	6	8	16	Shale	966	982
30	Shale	8	38	5	Lime	982	987
2	Lime	38	40	3	Shale	987	990
151	Shale	40	191	3	Black Shale	990	993
212	Lime	191	403	4	Shale	993	997
65	Soft Lime	403	468	1	Lime	997	998
50	Shale	468	518	46	Shale	998	1044
87	Lime	518	605	1	Lime	1044	1045
5	Shale	605	610	1	Shale	1045	1046
16	Lime	610	626	11	Oil Sand	1046	1057
3	Black Shale	626	629	2	Shale w/ oil	1057	1059
20	Lime	629	649	53	Shale	1059	1112
1	Shale	649	650				
5	Lime	650	655				
165	Shale	655	820				
4	Lime	820	824		T.D.		1112
8	Shale	824	832		T.D. of Pipe		1106
1	Lime	832	833				
10	Shale	833	843				
9	Lime	843	852				
58	Shale	852	910				
2	Lime	910	912				
2	Black Shale	912	914				
6	Shale	914	920				
27	Lime	920	947				
2	Black Shale	947	949				
12	Shale	949	961				

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CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 45696
FIELD TICKET REF # 40109
LOCATION Thayer
FOREMAN Gary W. White

TREATMENT REPORT
FRAC & ACID

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-12-09	4950	Wingroad #25-09	216	15 21	16	WO
CUSTOMER Piqua Petro Center			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS			524			
CITY STATE ZIP CODE			478			
			273			
			489/T103 Susan			
			412/T87 John			

WELL DATA

CASING SIZE	2 1/2	TOTAL DEPTH	
CASING WEIGHT		PLUG DEPTH	
TUBING SIZE		PACKER DEPTH	
TUBING WEIGHT		OPEN HOLE	
PERFS & FORMATION		1050-62 (1)	55'

TYPE OF TREATMENT

Acid / gel / sand / water

CHEMICALS

75 1570 HCl Acid	Customer Water
Inhibitor	20' Gel
N-24	Preacid
	Preacid

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
Pad						BREAKDOWN 1900
- Skinned shut at 15' wbl						START PRESSURE
- pump release several times - New 10 pit valve						END PRESSURE
- customer called because fear acid						BALL OFF PRESS
						ROCK SALT PRESS
Pad	10					ISIP
20/40			25	300		5 MIN
12/20			25	2500		10 MIN
12/20 2 1/2 balls			1	500		15 MIN
12/20			1-25	2200		MIN RATE
Flush						MAX RATE
Release balls						DISPLACEMENT 6.1
overflow sh						
Totals	10 210			5500		

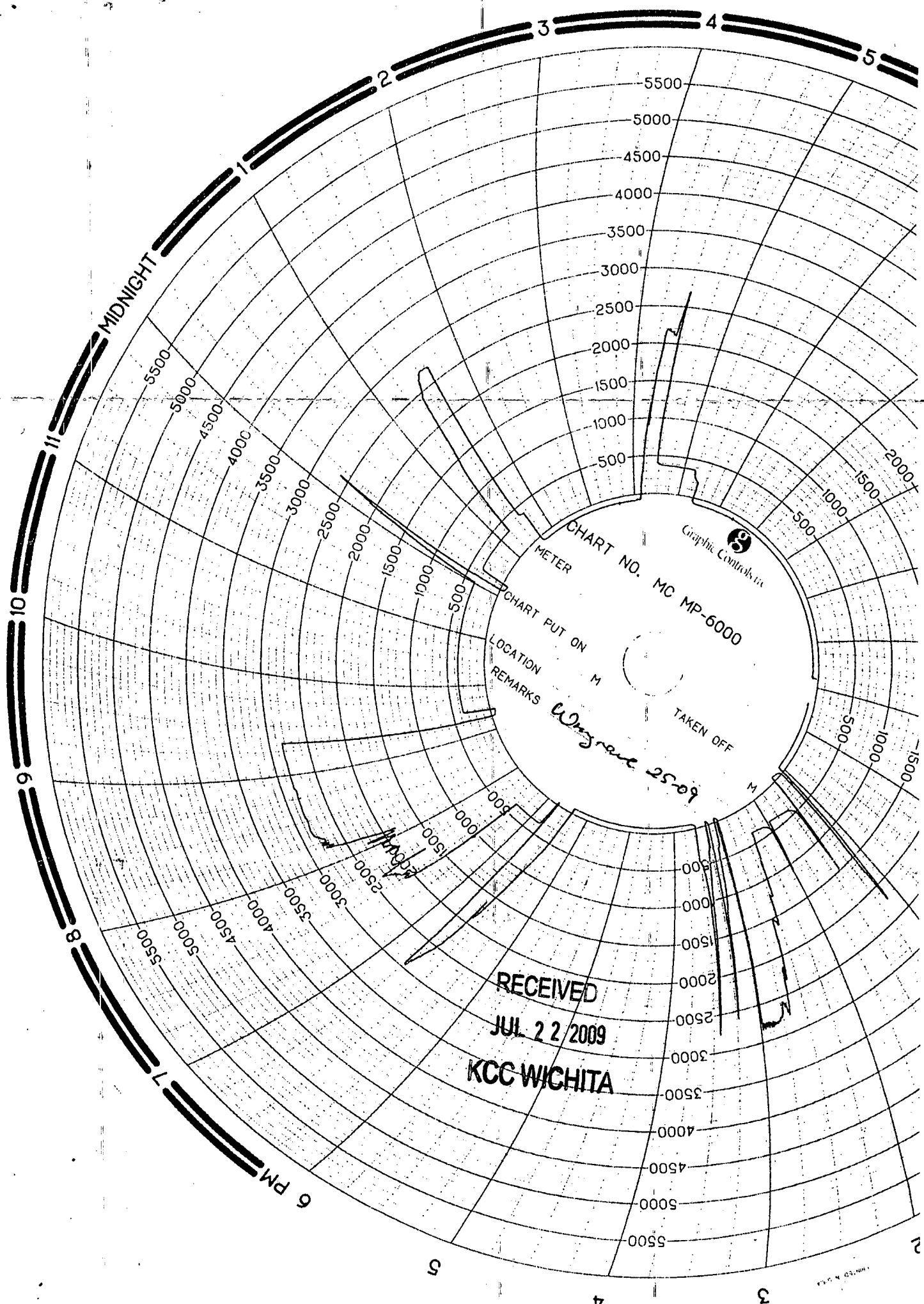
REMARKS:

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AUTHORIZATION _____ TITLE _____ DATE _____



Graphic Controls Inc
CHART NO. MC MP-6000

METER
CHART PUT ON M
LOCATION
REMARKS
TAKEN OFF M

Wing rate 2509

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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 229989

Invoice Date: 06/15/2009 Terms: 0/30,n/30

Page 1

LAIR, GREG
DBA: PIQUA PETROLEUM
1331 XLAN ROAD
PIQUA KS 66761
(620)463-2681

WINGRAVE 25-09,08-09,04-09
03-09
40109
16-24-16
06-12-09

Part Number	Description	Qty	Unit Price	Total
1275	15% HCL	300.00	1.6000	480.00
1202	ACID INHIBITOR	.75	43.2500	32.44
1219	NON-IONIC NON EMUL	.75	31.0000	23.25
4326	7/8" RUBBER BALL SEALERS	3.00	2.8500	8.55
4327	7/8" BIO BALL SEALERS	11.00	7.5000	82.50
1231	FRAC GEL	500.00	4.9000	2450.00
1208	BREAKER LEB4-ESA 14-GB10	1.50	177.0000	265.50
1205A	BIOCIDE (AMA-35-D-P) (DR	14.00	27.2500	381.50
2101	20/40 BRADY SAND	1200.00	.2100	252.00
2102	12/20 BRADY	23800.00	.2300	5474.00

Description	Hours	Unit Price	Total
293 MINIMUM ACID SPOTTING CHARGE	1.00	350.00	350.00
293 MINIMUM ACID SPOTTING CHARGE	1.00	350.00	350.00
293 MINIMUM ACID SPOTTING CHARGE	1.00	350.00	350.00
293 MINIMUM ACID SPOTTING CHARGE	1.00	350.00	350.00
293 MILEAGE CHARGE (ONE WAY)	50.00	3.43	171.50
T-87 WATER TRANSPORT (FRAC)	5.00	105.00	525.00
VALVE FRAC VALVES (2" OR 3")	4.00	.00	.00
BALLI BALL INJECTOR	4.00	.00	.00
478 BULK SAND DELIVERY	1.00	295.00	295.00
T-103 WATER TRANSPORT (FRAC)	5.00	105.00	525.00
524 MINIMUM COMBO CHARGE 1000 HP UNIT	1.00	2165.00	2165.00
524 MINIMUM COMBO CHARGE 1000 HP UNIT	1.00	1950.00	1950.00
524 MINIMUM COMBO CHARGE 1000 HP UNIT	1.00	1625.00	1625.00
524 MINIMUM COMBO CHARGE 1000 HP UNIT	1.00	1625.00	1625.00
524 MILEAGE CHARGE (ONE WAY)	50.00	3.43	171.50

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Parts:	9449.74	Freight:	.00	Tax:	5.74	AR	19908.48
Labor:	.00	Misc:	.00	Total:	19908.48		
Sublt:	.00	Supplies:	.00	Change:	.00		

1255 590
18,913.06

1255 590 PD
within 10 days of
Invoice

Signed _____

Date _____

Handwritten notes and signatures at the bottom right of the page.