

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 30345
Name: PIQUA PETRO INC
Address: 1331 XYLAN ROAD
City/State/Zip: PIQUA, KS 66761
Purchaser: MACLASKEY
Operator Contact Person: GREG LAIR
Phone: (620) 433-0099
Contractor: Name: PIQUA PETRO INC
License: 30345
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>2-13-06</u>	<u>2-15-06</u>	<u>4-8-06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 207-26975-0000
County: WOODSON
S2-S2-NW-SE Sec. 16 Twp. 24 S. R. 16 East West
1500 feet from N (circle one) Line of Section
3320 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: WINGRAVE Well #: WGG 02-06
Field Name: VERNON

Producing Formation: SQUIRREL
Elevation: Ground: N/A Kelly Bushing: N/A
Total Depth: 1060 Plug Back Total Depth: 1055
Amount of Surface Pipe Set and Cemented at 40 FT 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 1055 w/ 130 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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

Alt 2-Dlg - 9/16/08

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.

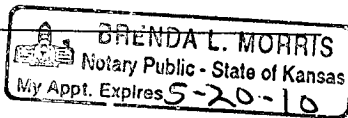
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: [Signature]
Title: PRESIDENT Date: 3-8-07

Subscribed and sworn to before me this 8TH day of MARCH, 2007.

Notary Public: Brenda L. Morris
BRENDA L. MORRIS

Date Commission Expires: MAY 20, 2010



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
MAR 09 2007

KCC WICHITA

Operator Name: PIQUA PETRO INC Lease Name: WINGRAVE Well #: 02-06
 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 (Attach Additional Sheets) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 (Submit Copy) 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 type="checkbox"/> New <input checked="" 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 IN	7 IN		40 FT	PORTLAND	15	
LONG STRING	5 3/4 IN	2 7/8 IN		1055	60/40 POZ	130	

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
23 PERFS	1002.5' - 1019'	SPOTTED 75 GAL 15% HCL ACID	1002.5-1019

TUBING RECORD		Size 2 7/8	Set At 1055	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 4-8-06		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 1 Bbls.	Gas Mcf	Water 1 Bbls.	Gas-Oil Ratio 1:1	Gravity 32

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Submit ACO-18.) Other (Specify) _____

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 08339
 LOCATION EUREKA
 FOREMAN Kevin McCoy

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
2-15-06	4950	WINGRAVE WGG 02-06				Woodson	
CUSTOMER <u>Piqua Petroleum</u>							
MAILING ADDRESS <u>1331 Xylon Rd.</u>							
CITY <u>Piqua</u>		STATE <u>Ks</u>	ZIP CODE				
		TRUCK #		DRIVER			
		<u>445</u>		<u>RICK L.</u>			
		<u>441</u>		<u>LARRY</u>			
		<u>452 T83</u>		<u>Jim</u>			

JOB TYPE Longstring HOLE SIZE 5 3/4" HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH 1055' DRILL PIPE _____ TUBING 2 7/8 10rd OTHER _____
 SLURRY WEIGHT 13.8* SLURRY VOL 32 BBL WATER gal/sk _____ CEMENT LEFT in CASING 0'
 DISPLACEMENT 6.2 BBL DISPLACEMENT PSI 500 PSI 1000 shut in RATE _____

REMARKS: Safety Meeting: Rig up to 2 7/8 Tubing. Break Circulation w/ 10 BBL fresh water. Pump 4 sks Gel flush, 10 BBL water spacer, Mixed 130 sks 60/40 Pozmix Cement w/ 4% Gel, 1% CaCl2 @ 13.8* per/gal, yield 1.40. Shut down. wash out Pump & Lines. Drop Plug. Displace w/ 6.2 BBL fresh water. Final Pumping Pressure 500 psi. Bump Plug to 1000 psi. Shut Tubing in @ 1000 psi. Good Cement Returns to Surface = 7 BBL Slurry. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	35	MILEAGE	3.15	110.25
1131	130 sks	60/40 Pozmix Cement	8.40	1092.00
1118 A	9 sks	Gel 4%	7.00	63.00
1102	100*	CaCl2 1%	.64*	64.00
1118 A	4 sks	Gel Flush	7.00	28.00
5407 A	5.59 TONS	35 miles Bulk Truck	1.05	205.43
5501 C	3 HRS	WATER TRANSPORT	98.00	294.00
1123	4200 GALS	City water	12.80 ^{per 1000}	53.76
4402	1	2 7/8 Top Rubber Plug	18.00	18.00
			Sub Total	2728.44
			SALES TAX	83.08
			ESTIMATED TOTAL	2811.52

Thank You

002014

6.3% RECEIVED

MAR 09 2007

AUTHORIZATION Witnessed By Greg LAIR

TITLE owner

DATE

KCC WICHITA

ATED OIL WELL SERVICES, INC.
 14TH STREET, CHANUTE, KS. 66720
 431-9210 OR 800-467-8676

TICKET NUMBER 36512
 FIELD TICKET REF # 29011
 LOCATION 1 pager
 FOREMAN Brett Busby

**TREATMENT REPORT
 FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-8-06		Wingrave 02-06WG5				WO
CUSTOMER			TRUCK #			
Piqua Petco			DRIVER			
MAILING ADDRESS			TRUCK #			
CITY			DRIVER			
STATE			TRUCK #			
ZIP CODE			DRIVER			

WELL DATA

CASING SIZE	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE <u>3 1/2" 10RD</u>	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
<u>1002-1019 (23)</u>	

TYPE OF TREATMENT

Acid spot - frac	CHEMICALS	305.00
MAED		104.00
Breaker		910.00

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
PAD	20	16			3100	BREAKDOWN
12-20		16		2500#	2100	START PRESSURE 2500
8-12		16		3500#	1600	END PRESSURE 1600
5 ballbedders		12			3000	BALL OFF PRESS 3000
12-20		12			500	ROCK SALT PRESS
8-12		12-15		2500#		ISIP
		15		500#		5 MIN
			TOTAL	6,000#	1512	10 MIN 275.00
FLUSH	6	15			16	15 MIN
Release balls to T.D.					5.88	MIN RATE WC
OVERFLUSH	3	16				MAX RATE 588.00
TOTAL	205					DISPLACEMENT 800.00

REMARKS: spot 75 gal. - 15% HCl acid on perfs /
 spotted 2 days prior

RECEIVED 4894.01
 MAR 09 2007

location 3:30PM - 5:30PM

AUTHORIZATION _____ TITLE _____ KCC WICHITA DATE 4-8-06