

JUL 24 2009

Form ACO-1

October 2008

Form Must Be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

*See
me
8/03/09*

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 LEIS, JOHN E.

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.: _____

5/28/09 5/28/09 6/15/09

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

API No. 15 - 207-27487-0000

Spot Description: _____

_____ SW _____ NE _____ SE Sec. 16 Twp. 24 S. R. 16 East West

1900 Feet from North / South Line of Section

1300 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Woodson

Lease Name: Wingrave *WNG* Well #: 04-09

Field Name: Vernon

Producing Formation: Squirrel

Elevation: Ground: n/a Kelly Bushing: _____

Total Depth: 1062 Plug Back Total Depth: 1057

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: 1057

feet depth to: surface w/ 150 sx cmt.

Drilling Fluid Management Plan AH II NCR 8-12-09
(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: _____

Title: President Date: July 20, 2009

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

09

Notary Public: Brenda L. Morris **BRENDA L. MORRIS**
Notary Public - State of Kansas

Date Commission Expires: May 20, 2010 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 *WWE* Well #: 04-09
 Sec. 16 Twp. 24 S. R. 16 East West County: Woodson

5/21/09
5/23/09

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 <div style="text-align: center;"> KANSAS CORPORATION COMMISSION JUL 24 2009 RECEIVED </div>
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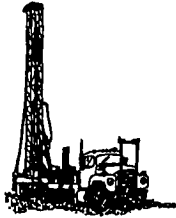
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12"	7"		40'	Regular	11	
Longstring	6 1/4"	2 7/8"	6.5#	1057	60/40 Pozmix	150	2% gel

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
1	11 shots from 995 to 1005	75 gal 15% HCL	

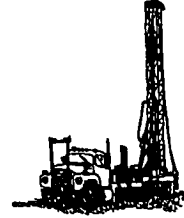
TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. 6/15/09		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. 1	Gas Mcf	Water Bbls. 1
		Gas-Oil Ratio	Gravity 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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LEIS OIL SERVICES

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



Operator License #: 30345	API #: 207-27487-0000
Operator: Piqua Petro, Inc.	Lease: Wingrave <i>NWE</i>
Address: 1331 Xylan Rd, Piqua, KS 66761	Well #: wgg 04-09
Phone: 620.433.0099	Spud Date: 05/28/09 Completed: 05/28/09
Contractor License: 32079	Location: NW-NE-SE of 16-24-16E
T.D. : 1062 T.D. of Pipe: 1057	1900 Feet From South
Surface Pipe Size: 7" Depth: 41'	1300 Feet From East
Kind of Well: Oil	County: Woodson

*Rec
M
8/29/09*

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
18	Soil and Clay	0	18	3	Shale	991	994
2	Sand	18	20	5	Oil Sand	994	999
111	Shale	20	131	63	Shale	999	1062
56	Lime	131	187				
23	Shale	187	210				
192	Lime	210	402				
56	Shale	402	458				
88	Lime	458	546				
4	Black Shale	546	550				
45	Lime	550	595				
166	Shale	595	761				
2	Lime	761	763				
13	Shale	763	776				
20	Lime	776	796				
60	Shale	796	856		T.D. of Pipe		1057
25	Lime	856	891		T.D.		1062
2	Black Shale	891	893				
13	Shale	893	906				
4	Lime	906	910				
17	Shale	910	927				
5	Lime	927	932				
4	Shale	932	936				
2	Black Shale	936	938				
12	Shale	938	950				
8	Oil Sand	950	958				
30	Shale	958	988				
1	Lime	988	989				
1	Shale	989	990				
1	Lime	990	991				

KANSAS CORPORATION COMMISSION
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ID#
 C ID # 165290
 Shop # 620 437-2661
 Cellular # 620 437-7582
 Office # 316 685-5908
 Office Fax # 316-685-5926
 Shop Address: 3813A Y Road
 Madison, KS 66860

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

Cement, Acid or Tools
 Service Ticket
 3157

DATE 6-2-09

COUNTY Woodson CITY _____

CHARGE TO Piqua Petro, Inc

ADDRESS 1331 Xylan Road CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Wingrove WGG '04-09 CONTRACTOR John Leis

KIND OF JOB Logging SEC. _____ TWP. _____ RNG. _____

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
		700.00	
150 sks	60/40 Pozmix cement	1552.50	
258 lb	Gel 2%	64.50	
100 lb	Gel > Flush Ahead	25.00	
4	Hrs water Truck	320.00	
	BULK CHARGE		
6.9 Tons	BULK TRK. MILES <i>minimum charge</i>	225.00	
—	PUMP TRK. MILES <i>Trk. in area</i>	N/C	
1	PLUGS 2 7/8" Top Rubber	17.00	
		6.3% SALES TAX	104.52
		TOTAL	3008.52

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T.D. 1062'

SIZE HOLE _____

MAX. PRESS. _____

PLUG DEPTH _____

PLUG USED _____

CSG. SET AT _____ VOLUME _____

TBG SET AT 1055' VOLUME 6' Bbls

SIZE PIPE 2 7/8" - 8 1/2"

PKER DEPTH _____

TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, Break circulation with fresh water, 5 Bbl Gel Flush, circulated Gel around to condition Hole with fresh water, Mixed 150 sks 60/40 Pozmix cement w/ 2% Gel. Shut down - wash out Pump & lines - Release Plug - Displace Plug with 6 Bbls water. Final Pumping at 450 PSI - Bumped Plug to 1100 PSI - close Tubing in with 1100 PSI Good cement returns w/ 6 Bbls slurry

EQUIPMENT USED

NAME _____ UNIT NO. _____

Kelly Kimberlin 185

Brad Butler
 HSI REP.

NAME _____ UNIT NO. _____

Jerry #91, Clayton #193

Called by Greg Lair
 OWNER'S REP.

Leis Oil Services, LLC

111 E. Mary
Yates Center, KS 66783

Invoice

Number: 1033

Date: June 17, 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 wgg 04-09

Date	Description	Hours	Rate	Amount
06-01-2009	Drilling for Wingrave wgg 04-09	1,062.00	5.25	5,575.50
06-01-2009	Cement for Surface	11.00	12.00	132.00
Total				\$5,707.50

PO # 11794 6/22/09

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0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$23,133.00	\$0.00	\$0.00	\$0.00	\$23,133.00



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

12/29/09
3rd well

TICKET NUMBER 45698
FIELD TICKET REF # 40109
LOCATION _____
FOREMAN _____

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-12-09	4950	Wingrove ^{WINGROVE} 09-09	16	29	16	WO
CUSTOMER Green Linn DBA Piquette			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			524	Kern		
CITY			478	Patt		
STATE			293	Eric		
ZIP CODE			481/T103	Jason		
			413/T87	John		

WELL DATA

CASING SIZE <i>2 1/2</i>	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	

TYPE OF TREATMENT

Acid Spud / Small Fracture

CHEMICALS

<i>75 15% HCl</i>	<i>Customer Water</i>
<i>0.3%</i>	<i>20" Gel / P. acid</i>
<i>T. 1.1.1.1</i>	<i>P. acid</i>

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<i>1st</i>	<i>15</i>	<i>1.0</i>		<i>10</i>		BREAKDOWN <i>2000</i>
<i>2nd</i>				<i>10</i>		START PRESSURE
<i>3rd</i>				<i>3200</i>		END PRESSURE
<i>4th</i>			<i>1</i>	<i>500</i>		BALL OFF PRESS
<i>5th</i>			<i>1.25</i>	<i>700</i>		ROCK SALT PRESS
<i>Flashes</i>	<i>6</i>					ISIP <i>450</i>
<i>P. acid</i>	<i>5</i>					5 MIN
<i>acid</i>						10 MIN
						15 MIN
						MIN RATE
						MAX RATE
<i>Totals</i>	<i>135</i>			<i>7000</i>		DISPLACEMENT <i>6</i>

REMARKS:

Chart for 12/29/09

KANSAS CORPORATION COMMISSION

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AUTHORIZATION _____

TITLE _____

DATE _____



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 KYLAN ROAD
PIQUA KS 66761
(620)468-2681

*KCC
not stop log*

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

KANSAS CORPORATION COMMISSION

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

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

less 590 pd within 10 days of Invoice
 Date 7/26/09
 18913.06
 19908.48 - 590 = 18913.06

Signed _____

BARTLESVILLE, OK 918/338-0808

ELDORADO, KS 316/322-7022

EUREKA, KS 620/583-7664

GILLETTE, WY 307/686-4914

McALESTER, OK 918/426-7667

OTTAWA, KS 785/242-4044

THAYER, KS 620/839-5269

WORLD, WY 307/347-4577