

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

*620
1/24/09
4/29/09*

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 # 33557
Name: Sky Drilling
Wellsite Geologist: _____

API No. 15 - 197-20282-0000
Spot Description: _____
NW SW SE NE Sec. 2 Twp. 13 S. R. 10 East West
2980 Feet from North / South Line of Section
1100 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Wabaunsee
Lease Name: Thowe D North Well #: 05-09
Field Name: Mill Creek

KANSAS CORPORATION COMMISSION

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Purchaser: _____
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.)

Producing Formation: Simpson
Elevation: Ground: 1110 Kelly Bushing: _____
Total Depth: 2942 Plug Back Total Depth: 2936
Amount of Surface Pipe Set and Cemented at: 310 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/ _____

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.: _____
1/21/09 1/22/09 2/20/09

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 1 - Dig - 1/25/10

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

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: *Greg Lair*
Title: President Date: April 15, 2009

Subscribed and sworn to before me this 15th day of April
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
N Letter of Confidentiality Received
If Denied, Yes Date: _____
Wireline Log Received
Geologist Report Received
UIC Distribution
RECEIVED

APR 20 2009

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Operator Name: Piqua Petro, Inc. Lease Name: Thowe D North Well #: 05-09
 Sec. 2 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Lansing	1231
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Kansas City	1378
List All E. Logs Run:		Miss 4S	2209
		Hurton	2691
		Viola	2939

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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 1/4	8 5/8		310	Class A	165	3% Cacl, 2% gel
Longstring	7 7/8	5 1/2		2936	Class A	175	

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

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TUBING RECORD: Size: <u>2 7/8</u> Set At: <u>2903</u> Packer At: _____ Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	KCC WICHITA
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Date of First, Resumed Production, SWD or Enhr. <u>2/21/09</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 <u>1 BPD</u> Gas Mcf _____ Water <u>1 BPD</u> Bbls. _____ 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 checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____
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CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 20770
LOCATION FLORIDA
FOREMAN Rick Ledford

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
1-22-09	4950	Thane O. North 0509	2	13	105	Wichita
CUSTOMER Plain Petroleum Inc.			TRUCK #		DRIVER	
MAILING ADDRESS 1331 Xylan Rd			463		Chris	
CITY Plain			479		John	
STATE KS			TRUCK #		DRIVER	
ZIP CODE 66676						

JOB TYPE Surface HOLE SIZE 12 1/4" HOLE DEPTH 315' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 310' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15 # SLURRY VOL _____ WATER gal/sk 6.5 CEMENT LEFT in CASING 80'
 DISPLACEMENT 18.5 Bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting. Rig up to 8 5/8" casing. Break circulation w/ 10 Bbl fresh water. Mixed 110 sacks class "A" cement w/ 3% cocle, 27 gal + 1/4" Floerlok @ 15000/yr. Displace w/ 18.5 Bbl fresh water. Shut casing in w/ good cement returns to surface. Job complete. Rig down

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	680.00	680.00
5406	90	MILEAGE	3.45	310.50
11045	116.5 sacks	class "A" cement	12.20	2085.50
1102	465 #	3% cocle	.71	330.15
1118A	310 #	27a gal	.16	49.60
1102	41 #	1/4" Floerlok @ 15k	1.97	80.27
5407A	7.8	tan-mileage back tax	1.16	814.32
			RECEIVED	
			APR 20 2009	
			KCC WICHITA	
			Subtotal	4366.84
			SALES TAX	113.91
			ESTIMATED TOTAL	4480.75

Revin 3737

228550
TITLE Toolpusher / Skyy DCLG

AUTHORIZATION Witnessed by Ben

DATE _____



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 20805

LOCATION Eureka

FOREMAN Troy Strickler

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8876

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-28-09	4950	Thore D North 05-9				
CUSTOMER <u>Piqua Petroleum, Inc.</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>1331 Xylan Rd</u>			<u>520</u>	<u>Rick</u>		
CITY <u>Piqua</u>	STATE <u>Ks</u>	ZIP CODE <u>66761</u>	<u>515</u>	<u>Chris</u>		
			<u>437</u>	<u>Jim</u>		

JOB TYPE Longstring HOLE SIZE 7 7/8" HOLE DEPTH 2942' CASING SIZE & WEIGHT 5 1/2" 15.5"
 CASING DEPTH 2936' KB DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15" SLURRY VOL 49 BU WATER gal/sk _____ CEMENT LEFT IN CASING 0'
 DISPLACEMENT 69.8 BU DISPLACEMENT PSI 600 MIX PSI 1100 duply RATE _____

REMARKS: Safety Meeting: Rig up to 5 1/2" casing. Drop Trip Ball. wait 10 mins Set
Packer @ 1500 PSI. Pump 5Bbl water. Pump back Salt Flush. 5Bbl water.
Mixed 175sck Class A Cement w/ 5" Kol-Seal /sk, 10% Salt, + 3/4% CFL-110 +
1/4% CAF-38. @ 15"/gal wash out Pump + liner. Release Plug. Dipstick + / BU
water. Final Pumping Pressure 600 PSI Pump Plug to 1100 PSI
wait 2mins. Release Pressure. Float Held. Good Circulation @ all Times.

Job Complete

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	870.00	870.00
5406	90	MILEAGE	3.45	310.50
11045	175sck	Class A Cement	12.70	2222.50
1110A	900"	Kol-Seal 5" /sk	.39	351.00
1111	750"	Salt 10% (BWOMW)	.31	232.50
1135	40"	CFL-110 1/4%	7.05	282.00
1146	40"	CAF-38 1/4%	7.25	290.00
1111	300"	Salt / Pre-Flush	.31	93.00
5407A	8.22 Ton	Ton-Mileage Bulk Truck	1.16	954.72
5502C	6hrs.	80Bbl Vac Truck	94.00	564.00
1123	3000gal	City Water	14.00/gal	42.00
4253	1	5 1/2" Type A Packer shoe	1542.00	1542.00
4104	1	5 1/2" Cement Basket	206.00	206.00
4406	1	5 1/2" Top Rubber Phy	58.00	58.00
			Sub Total	7921.67
		Thank Ya!	69%	SALES TAX ESTIMATED
				TOTAL

AUTHORIZATION Called by Ben TITLE Skylar Briff DATE _____ RECEIVED

APR 20 2009

KCC WICHITA