

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30345
Name: PIQUA PETRO, INC.
Address 1: 1331 XLAN 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

API No. 15 - 207-27694-0000
Spot Description: _____
NE SW NW SE Sec. 16 Twp. 25 S. R. 17 East West
1,800 Feet from North / South Line of Section
2,200 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: WOODSON
Lease Name: COLLINS BENNETT Well #: 11-10

Wellsite Geologist: _____
Purchaser: MACLASKEY
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., etc.): _____

Field Name: HUMBOLDT-CHANUTE
Producing Formation: SQUIRREL
Elevation: Ground: EST 1031 Kelly Bushing: _____
Total Depth: 880 Plug Back Total Depth: 875
Amount of Surface Pipe Set and Cemented at: 22 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 875
feet depth to: SURFACE w/ 90 sx cmt.

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
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____
9/13/10 9/13/10 10/21/10
Spud Date or Date Reached TD Completion Date or Recompletion Date

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 #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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.

AFFIDAVIT

I am the affiant and I hereby certify that 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: 11-8-10

KCC Office Use ONLY

Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: DJg Date: 11/12/10

Operator Name: PIQUA PETRO, INC. Lease Name: COLLINS BENNETT Well #: 11-10
 Sec. 16 Twp. 25 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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

| | |
|---|---|
| Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, Submit Copy) | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum |
|---|---|

List All E. Logs Run:
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" | | 22 | REGULAR | 5 | |
| LONGSTRING | 5 3/4" | 2 7/8" | | 875 | OWD | 90 | |

| 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 |
|----------------|---|---|-------|
| Every 9 " | PERF FROM 820 TO 830 W/14 SHOTS | | |
| | | | |
| | | | |

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| | | | |
|--|--------------------|--|---|
| TUBING RECORD: Size: <u>1"</u> Set At: <u>870</u> Packer At: _____ | | Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Date of First, Resumed Production, SWD or ENHR. <u>10/21/10</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 Bbls. <u>1</u> | Gas Mcf <u>1</u> | Water Bbls. <u>1</u> Gas-Oil Ratio <u>1:1</u> Gravity <u>24</u> |

| | | |
|---|--|--|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease (If vented, Submit ACO-18.) | METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: _____ _____ |
|---|--|--|

Leis Oil Services

507 S. State
Yates Center, KS 66783

Invoice

Number: 1003

Date: September 22, 2010

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 |
|-----------|-------|---------------------|
| | | CollinsBennett11-10 |

| Date | Description | Hours | Rate | Amount |
|--------------|------------------------------------|--------|-------|-------------------|
| 9-13-10 | Drilling for Collins Bennett 11-10 | 880.00 | 5.75 | 5,060.00 |
| * 9-13-10 | Cement for Surface | 5.00 | 11.00 | 55.00 |
| Total | | | | \$5,115.00 |

PO #11969
10/15/10

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| 0 - 30 days | 31 - 60 days | 61 - 90 days | > 90 days | Total |
|-------------|--------------|--------------|-----------|-------------|
| \$11,436.50 | \$0.00 | \$0.00 | \$0.00 | \$11,436.50 |



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 # 237247

INVOICE

=====
 Invoice Date: 10/12/2010 Terms: 0/30,n/30
 Page 1

LAIR, GREG
 DBA: PIQUA PETROLEUM
 1331 KYLAN ROAD
 PIQUA KS 66761
 (620)468-2681

COLLENS-BENETT 11-10
 44654
 16-25-17
 10-8-10

| Part Number | Description | Qty | Unit Price | Total |
|-------------|-----------------------------------|---------|------------|---------|
| 1275 | 15% HCL | 75.00 | 1.7000 | 127.50 |
| 1202 | ACID INHIBITOR | .25 | 46.0000 | 11.50 |
| 1231 | FRAC GEL | 75.00 | 5.2000 | 390.00 |
| 1208 | BREAKER LEB4-ESA 14-GB10 | .25 | 187.0000 | 46.75 |
| 1205A | BIOCIDE (AMA-35-D-P) (DR | 2.00 | 29.0000 | 58.00 |
| 1244 | CLAY STAY (CS-250) (ESA-5 | 2.00 | 37.0000 | 74.00 |
| 4327 | 7/8" BIO BALL SEALERS | 3.00 | 8.0000 | 24.00 |
| 2101 | 20/40 BROWN SAND | 300.00 | .2300 | 69.00 |
| 2102 | 12/20 BROWN SAND | 2200.00 | .2500 | 550.00 |
| | Description | Hours | Unit Price | Total |
| 293 | MINIMUM ACID SPOTTING CHARGE | 1.00 | 375.00 | 375.00 |
| 293 | MILEAGE CHARGE (ONE WAY) | 50.00 | 3.65 | 182.50 |
| | VALVE FRAC VALVES (2" OR 3") | 1.00 | 100.00 | 100.00 |
| | BALLI BALL INJECTOR | 1.00 | .00 | .00 |
| T-95 | WATER TRANSPORT (FRAC) | 1.00 | 112.00 | 112.00 |
| 478 | BULK SAND DELIVERY | 1.00 | 315.00 | 315.00 |
| T-103 | WATER TRANSPORT (FRAC) | 1.00 | 112.00 | 112.00 |
| 524 | MINIMUM COMBO CHARGE 1000 HP UNIT | 1.00 | 2300.00 | 2300.00 |
| 524 | MILEAGE CHARGE (ONE WAY) | 50.00 | 3.65 | 182.50 |

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| | | | | | | | |
|--------|---------|-----------|-----|---------|---------|----|--------|
| Parts: | 1350.75 | Freight: | .00 | Tax: | 1.75 | AR | 5031.5 |
| Labor: | .00 | Misc: | .00 | Total: | 5031.50 | | |
| Sublt: | .00 | Supplies: | .00 | Change: | .00 | | |

Signed _____ Date _____

BARTLESVILLE, OK ELDORADO, KS EUREKA, KS GILLETTE, WY OAKLEY, KS OTTAWA, KS THAYER, KS WORLAND, WY
 316/322-7022 620/583-7664 307/686-4914 785/672-2227 620/839-5269 307/347-4577



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 29111
LOCATION Encke
FOREMAN Dry Stricker

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 |
|----------------------------------|-------------|--------------------|----------------|----------|---------|---------|
| 9-20-10 | 4950 | Collins 11-10 | | | | Woodson |
| CUSTOMER Piqua Petroleum | | | Safety meeting | | | |
| MAILING ADDRESS 1331 Lybn Rd. | | | | | | |
| CITY Piqua | STATE Ks | ZIP CODE | TRUCK # | DRIVER | TRUCK # | DRIVER |
| | | | 520 | Cliff | C.S. | |
| | | | 479 | Alan A | A.B. | |

JOB TYPE 45 0 HOLE SIZE _____ HOLE DEPTH 880' CASING SIZE & WEIGHT _____
 CASING DEPTH 875' DRILL PIPE _____ TUBING 2 7/8" OTHER _____
 SLURRY WEIGHT 13.5# SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING 0'
 DISPLACEMENT 58bl DISPLACEMENT PSI 500 MIX PSI 1000 Byp Ply RATE _____

REMARKS: Safety meeting: Rig up to 2 7/8" tubing. Break Circulation w/ 58bl water. Pumped 4sk Gel-Flush, 58bl water. Mixed 90sk O.W.C. Cement w/ 1/2" Phenoseal @ 13.5#/gal. Wash out pump & lines. Release Plug. Displace w/ 58bl water. Final Pumping Pressure 500 PSI. Bump Ply to 1000 PSI. Shut casing in w/ Good Cement to surface = 58bl slurry top of it.

Job Complete

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|-----------------|---------|
| 5401 | 1 | PUMP CHARGE | 925.00 | 925.00 |
| 5406 | 30 | MILEAGE 2nd of 2 wells | 11/c | 11/c |
| 1126 | 90sk | O.W.C. Cement | 17.00 | 1530.00 |
| 1107A | 45# | 1/2" Phenoseal | 1.15 | 51.75 |
| 1118A | 200# | Gel-Flush | .20/c | 40.00 |
| 5407 | | Ton-mileage RECEIVED | m/c | 315.00 |
| 4402 | 2 | 2 7/8" Top Rubber Plys NOV 17 2010 | 23.00 | 46.00 |
| | | | sub total | 2907.75 |
| | | | SALES TAX 7.22 | 121.75 |
| | | | ESTIMATED TOTAL | 3029.50 |

KCC WICHITA

Thank you!

AUTHORIZATION *[Signature]* TITLE 236691 DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.