

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 Xylan Rd
Address 2: _____
City: Piqua State: KS Zip: 66761 + _____
Contact Person: Greg Lair
Phone: (620) 433-0099
CONTRACTOR: License # 32079
Name: Leis Oil Service LLC
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.): _____

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 #: _____

01/10/11	01/10/11	02/10/11
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 207-27756-0000
Spot Description: _____
SW NW SE SE Sec. 4 Twp. 24 S. R. 17 East West
700 Feet from North / South Line of Section
1,200 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Woodson
Lease Name: Sovoboda Well #: 27-10W
Field Name: Neosho Falls-Leroy
Producing Formation: Mississippi
Elevation: Ground: 971 Kelly Bushing: _____
Total Depth: 1252 Plug Back Total Depth: 1248
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: 1248
feet depth to: surface w/ 135 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 #: _____
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: Monica Xiri
Title: Agent Date: 2/23/11

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
 Confidential Release Date: MAR 07 2011
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: DG Date: 3/9/11
- RECEIVED**
KCC WICHITA

Operator Name: Piqua Petro, Inc. Lease Name: Sovoboda Well #: 27-10W
 Sec. 4 Twp. 24 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 <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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, 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
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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	9.875	7.00		40	Class A	25	
Longstring	5.625	2.875		1248	OWC	135	
Production		1.00		to seating nipple			

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
	Perf from 1189.5 to 1194.0 w/ 10 shots		

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. 2/10/11	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 1:1	Gravity 30

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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <div style="text-align: center; border: 1px solid black; padding: 5px;">RECEIVED</div> <div style="text-align: center; border: 1px solid black; padding: 5px;">MAR 07 2011</div>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

KCC WICHITA

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
1-10-11	4950	SU 27-10				Woodson
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Piqua Petroleum			520	Cliff		
MAILING ADDRESS			515	Allen B.		
1351 Xylon Rd						
CITY	STATE	ZIP CODE				
Piqua	KS					

JOB TYPE surface 0 HOLE SIZE 9 3/8" HOLE DEPTH 23' CASING SIZE & WEIGHT 7"
 CASING DEPTH 23' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8" SLURRY VOL _____ WATER gal/sk 6.5 CEMENT LEFT in CASING 5'
 DISPLACEMENT 1/2 cu DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting- Rig up to 7" casing. Upstream 10' to TD. Mixed 25
SKS class 'A' cement w/ 2% casez + 2% gel @ 14.8" / gal. Displace w/ 1/2 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
54013	1	PUMP CHARGE	225.00	225.00
5406	30	MILEAGE	3.65	109.50
11045	25 sacks	class 'A' cement	13.50	337.50
1102	45"	2% casez	.75	33.75
11186	45"	2% gel	.20	9.00
5407		for mileage back to	m/c	315.00
			RECEIVED	
			MAR 7 2011	
			KCC WICHITA	
			subtotal	1529.25
			SALES TAX	27.76
			ESTIMATED TOTAL	1557.51

Rev'n 3737

AUTHORIZATION [Signature] TITLE 289122 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.



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 30192

LOCATION Eureka

FOREMAN Troy Strickler

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
1-18-11	4950	Sovaboda 27-10 west				Woodson
CUSTOMER Pineva Petroleum		Mailing Address 1331 Xyba Rd. Piqua	Safety J.S. TS T.S.			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY		STATE	ZIP CODE			
1331 Xyba Rd.		KS		445	John	
				543	Dave	

JOB TYPE L/S '0' HOLE SIZE 5 1/4" HOLE DEPTH 1252' CASING SIZE & WEIGHT _____
 CASING DEPTH 1248' DRILL PIPE _____ TUBING 2 7/8" OTHER _____
 SLURRY WEIGHT 13.5# SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0'
 DISPLACEMENT 7.261 DISPLACEMENT PSI 1300 MIX PSI 1600 RATE _____

REMARKS: Safety Meeting. Rig up to 2 7/8" tubing w/ Head + Manifold. Break Circulation w/ Fresh Water. Mixed 300 Gal-Flurl, 1000 gal Water. Mixed 1350 lb O.W.C. Cement w/ 1/2" /sk Phenoseal @ 13.5#/ft. Washout Pump + liner Release Pkg. Displace w/ 800 Fresh Water. Final Pumping Pressure 1300 PSI. Pump Pkg to 1600 PSI. Release Pressure. Float Held. Good Cement to surface = .5 bbl slurry to pit. 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	3.65	109.50
1126	1350#	O.W.C. Cement	17.00	2295.00
1107A	68#	Phenoseal 1/2" /sk	1.15	78.20
1118B	300#	Gel-Flurl	.20	60.00
5407		Ton-mileage	m/c	315.00
4402	2	2 7/8" Top Rubber Pkg	23.00	46.00
RECEIVED				
MAR 2011				
KCC WICHITA				
Thanks			546 total	3828.70
			SALES TAX	180.99
			ESTIMATED	
			TOTAL	4009.69

Rev'n 3737

AUTHORIZATION _____

TITLE _____

DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or 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.

KCC WICHITA

CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-467-8676

TICKET NUMBER 51371
FIELD TICKET REF # _____
LOCATION Thayer
FOREMAN Bobby Bunsby

TREATMENT REPORT
FRAC & ACID

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-27-11		Savaboda 27-10 West	4	24S	17	WYO
CUSTOMER			TRUCK #			
Pigna Petroleum			DRIVER			
MAILING ADDRESS			TRUCK #			
CITY			DRIVER			
STATE			489T103			
ZIP CODE			Josh/Wes			
			Eric			
			George			

CASING SIZE	TOTAL DEPTH	TYPE OF TREATMENT
11825-1194	10	Acid spot + ABO
PERFS & FORMATION	MISS Lime	CHEMICALS
		Acid-inhibitor - gill suspender
		StimOil - iron control

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
Breakdown stage acid		3.5			400	BREAKDOWN 700
acidize w/ 22 bbls 75 gal-15% HCl acid w/ 6-7 bioball sealers staged thru-out acid		3.5			450	START PRESSURE
flush till all balls +		3.5			500	END PRESSURE
Release balls to T.D.		3.8			575	BALL OFF PRESS 575 MA
OVERFLUSH	10 bbls					ROCK SALT PRESS
TOTAL BBL'S	23					ISIP 250
						5 MIN
						10 MIN
						15 MIN
						MIN RATE
						MAX RATE
						DISPLACEMENT 27 300g to perfs

REMARKS: held safety/ppc meeting 2:30-3:11
spotted 75 gal-15% HCl acid on perfs
6 bio-balls approx 1 ball every 45 sec.

Location 8:30AM - 9:30AM RECEIVED 45 miles
AUTHORIZATION [Signature] TITLE MAR 07 2011 DATE 1-27-11

Terms and Conditions are printed on reverse side.

KCC WICHITA