



KANSAS CORPORATION COMMISSION 1067344
OIL & GAS CONSERVATION DIVISION

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 + 1667
Contact Person: Greg Lair
Phone: (620) 433-0099
CONTRACTOR: License # 32079
Name: Leis, John E.
Wellsite Geologist: None
Purchaser: Maclasky

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 #: _____

09/30/2011	09/30/2011	11/09/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-207-27946-00-00

Spot Description: _____
SE SE NE SE Sec. 31 Twp. 23 S. R. 17 East West
1460 Feet from North / South Line of Section
200 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Woodson

Lease Name: Sylvia Ellis Well #: 16-11

Field Name: Neosho Falls LeRoy

Producing Formation: Mississippi

Elevation: Ground: 984 Kelly Bushing: 0

Total Depth: 948 Plug Back Total Depth: 944

Amount of Surface Pipe Set and Cemented at: 29 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 29

feet depth to: 0 w/ 25 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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.

Submitted Electronically

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: Deanna Garrison Date: 11/15/2011



1067344

Operator Name: Piqua Petro, Inc. Lease Name: Sylvia Ellis Well #: 16-11
 Sec. 31 Twp. 23 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See attachment
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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	11	7	20	29	Class A	25	
Longstring	6.75	2.875	6.5	944	60/40 Pozmix	125	

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
2	883 to 892 w/ 19 shots		

TUBING RECORD: Size: <u>1"</u> Set At: <u>To seating nipple</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>11/09/2011</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.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

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: _____ _____
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PO Box 684, Chanute, KS 66720
620-431-9210 or 800-467-8676



TICKET NUMBER 31617
LOCATION Chanute
FOREMAN Steve Neal

FIELD TICKET & TREATMENT REPORT

CEMENT APT # 15-207-27946

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
9-30-11	4950	Sylvia Ellis 16-11	31	R35	17E	Woodson	
CUSTOMER				TRUCK #	DRIVER	TRUCK #	DRIVER
Pigua Petroleum				485	Alan m		
MAILING ADDRESS				479	Chris m		
1331 Xylan Rd.							
CITY	STATE	ZIP CODE					
Pigua	Ks	66761					

JOB TYPE Surface HOLE SIZE 11" HOLE DEPTH 28' CASING SIZE & WEIGHT 7"
 CASING DEPTH 28' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 5'
 DISPLACEMENT 16bl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 7" casing. Break circulation w/ Fresh Water. Mix 25 sks Class A Cement w/ 2% Cacle, 7% Gel AT 14.5 gpm/sk. Displace with 16bl. Shut well in. Good cement returns to surface. Job complete Rig down.

Thank You

ACCOUNT CODE	QUANTITY of UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE	775.00	775.00
5406	0	MILEAGE <u>2^{1/2} hour</u>	-	-
11043	<u>25 sks</u>	<u>Class A Cement</u>	<u>14.25</u>	<u>356.25</u>
1107	<u>45"</u>	<u>Cacle 2%</u>	<u>.70</u>	<u>31.50</u>
1188B	<u>45"</u>	<u>2% Gel</u>	<u>.20</u>	<u>9.00</u>
5407	<u>1.18</u>	<u>Tanaka Bulk Truck</u>	<u>MIL</u>	<u>378.00</u>
			Subtotal	<u>1501.75</u>
			SALES TAX <u>7.5%</u>	<u>23.91</u>
			ESTIMATED TOTAL	<u>1530.72</u>

Rev 9/3/07

AUTHORIZATION *[Signature]* TITLE 241109 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

CONCILIATED
Oil Field Services, LLC

ENTERED

TICKET NUMBER 33238

LOCATION Eureka

FOREMAN Steve New

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

FIELD TICKET & TREATMENT REPORT

CEMENT APT 14-207-27946

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-2-11	4950	Sylvia Ellis 2/6-11	31	225	17E	Woodson
CUSTOMER <u>Pigua Petroleum</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>1331 Xylan Rd</u>			495	Alan m.		
CITY <u>Pigua</u>			479	Jim		
STATE <u>KS</u>						
ZIP CODE <u>66761</u>						

JOB TYPE Long string O HOLE SIZE 8 5/8" HOLE DEPTH 948' CASING SIZE & WEIGHT _____
 CASING DEPTH 948' DRILL PIPE _____ TUBING 2 3/8" OTHER _____
 SLURRY WEIGHT 12.6" SLURRY VOL _____ WATER gal/ak _____ CEMENT LEFT IN CASING _____
 DISPLACEMENT 5.43 bbls DISPLACEMENT PSI 500* MIX PER Bump Plug 1000* RATE _____

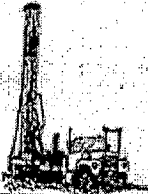
REMARKS: Safety Meeting: Rig up to 2 3/8" tubing. Break circulation with Fresh Water. Pump 300* Gel Flush x 5 bbls water spacer. Mix 1235skt 69/40 Pozmid Cement by 4* Kal-seal, 4% Gel & 1% cacl2. Shut down wash out pump & lines. Stuff & Plug. Displace with 5.43 bbls Fresh water. Final pumping Pressure 500* Bump Plug 1000*. Shut well in. Good cement Returns to surface. Job complete Rig down.

Thank You

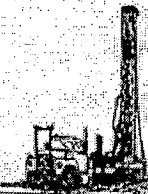
ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5461	1	PUMP CHARGE	975.00	975.00
5406	-	MILEAGE <u>N/C 2nd well</u>	-	-
1131	1235skt	69/40 Pozmid Cement	11.95	1493.75
110A	500*	Kal-seal 4* perisk	.44	220.00
1118B	420*	Gel 4% "	.20	86.00
1102	100*	cacl2 1%	.70	70.00
1118B	300*	Gel Flush	.20	60.00
5407	5.78	Ten mileage Bulk Truck	M/C	370.00
4402	2	2 3/8" Top Rubber Plug	28.00	56.00
		SubTotal		3290.75
		SALES TAX		144.96
		ESTIMATED TOTAL		3435.71

AUTHORIZATION [Signature] TITLE 244813 DATE _____
 7.3%

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.



LEIS OIL SERVICES



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

Operator License #: 30345	API #: 207-27946-0000
Operator: Piqua Petro	Lease: Sylvia Ellis
Address: 1331 Xylan Rd, Piqua, KS. 66761	Well #: 16-11
Phone: 620.433.0033	Spud Date: 9-30-11 Completed: 10-3-11
Contractor License: 32079	Location: SE-SE-NE-SE of 31-23-17
T.D. : 948 T.D. of Pipe: 944	1460 Feet From South
Surface Pipe Size: 7" Depth: 29'	200 Feet From East
Kind of Well: Oil	County: Woodson

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
7	Soil & Clay	0	7	3	Lime	786	789
13	Sand & Gravel	7	20	14	Shale	789	803
91	Shale	20	111	5	Lime	803	808
7	Lime	111	118	18	Shale	808	826
6	Shale	118	124	4	Lime	826	830
14	Lime	124	138	11	Shale	830	841
56	Shale	138	194	3	Lime	841	844
1	Lime	194	195	35	Shale	844	879
3	Shale	195	198	1	Lime	879	880
6	Lime	198	206	3	Shale	880	883
3	Shale	206	209	8	Broken Sand	883	891
109	Lime	209	318	57	Shale	891	948
63	Shale	318	402				
50	Lime	402	452				
3	Black Shale	452	455				
16	Lime	455	471				
3	Shale	471	474				
6	Lime	474	480				
1	Black Shale	480	482				
18	Lime	482	500		T.D.		948
161	Shale	500	661		T.D. of Pipe		944
5	Lime	661	666				
23	Shale	666	689				
9	Lime	689	698				
58	Shale	698	756				
2	Lime	756	758				
4	Shale	758	762				
14	Lime	762	774				
12	Shale	774	786				