



KANSAS CORPORATION COMMISSION 1083802
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: Maclaskey

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 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 #: _____
03/07/2012 03/12/2012 05/17/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-207-28069-00-00
Spot Description: _____
SE SE SE NE Sec. 8 Twp. 24 S. R. 16 East West
2470 Feet from North / South Line of Section
170 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Woodson
Lease Name: Hammond E Well #: 8-12
Field Name: Vernon
Producing Formation: Squirrel
Elevation: Ground: 1057 Kelly Bushing: 0
Total Depth: 1103 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 41 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 41
feet depth to: 0 w/ 8 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 Garriss Date: 06/11/2012



1083802

Operator Name: Pigua Petro, Inc. Lease Name: Hammond E Well #: 8-12
 Sec. 8 Twp. 24 S. R. 16 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 Attachments
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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	20	41	Regular	8	
Longstring	5.625	2.875	6.5	1101	60/40 Pozmix	140	Gel 4%, Cacl 1%

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ Plug Off Zone	-			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
2	1040.5 to 1050.5	75 gal 15% HCL acid on perf	

TUBING RECORD: Size: <u>1</u> Set At: <u>1038</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. _____		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____	
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 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) (Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Leis Oil Services, LLC

1410 150th Rd
Yates Center, KS 66783

Invoice

Number: 1001

Date: April 10, 2012

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
		10 wells March 2012

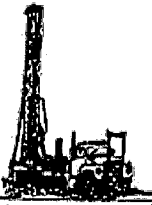
Date	Description	Hours	Rate	Amount
3-5-12	Drill pit	100.00	1.00	100.00
3-5-12	cement for surface	8.00	11.00	88.00
3-6-12	Hammond E 1-12	1,114.00	6.25	6,962.50
3-7-12	Drill pit	100.00	1.00	100.00
3-7-12	cement for surface	8.00	11.00	88.00
3-12-12	Hammond E 8-12	1,103.00	6.25	6,893.75
3-13-12	Drill pit	100.00	1.00	100.00
3-13-12	cement for surface	8.00	11.00	88.00
3-14-12	Wingrave 56-12	1,083.00	6.25	6,768.75
3-15-12	Drill pit	100.00	1.00	100.00
3-15-12	cement for surface	8.00	11.00	88.00
3-16-12	Wingrave 55-12	1,103.00	6.25	6,893.75
3-19-12	cement for surface	8.00	11.00	88.00
3-26-12	Wingrave 57-12	1,103.00	6.25	6,893.75
3-27-12	Drill pit	100.00	1.00	100.00

Full Amount 4/10/12

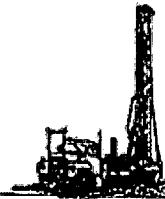
0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$72,974.25	\$0.00	\$0.00	\$0.00	\$72,974.25

#13579





LEIS OIL SERVICES



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

Operator License #: 30345	API #: 15-207-28069-00-00
Operator: Piqua Petro, Inc.	Lease: Hammond E
Address: 1331 Xylan Rd Piqua, KS 66761	Well #: 8-12
Phone: 620.433.0099	Spud Date: 3/7/12 Completed: 3/12/12
Contractor License: 32079	Location: SE-SE-SE-NE of 8-24S-16E
T.D. : 1103 T.D. of Pipe: 1101	2470 Feet From North
Surface Pipe Size: 7" Depth: 41'	170 Feet From East
Kind of Well: Oil	County: Woodson

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
4	Soil and Clay	0	4	12	Shale	942	954
2	Lime	4	6	9	Lime	954	963
177	Shale	6	183	11	Shale	963	974
56	Lime	183	239	4	Lime	974	979
41	Shale	239	260	17	Shale	979	991
204	Lime	260	464	12	Oil Sand	991	1003
15	Shale	464	479	32	Shale	1003	1035
6	Lime	479	485	1	Lime	1035	1036
35	Shale	485	520	3	Shale	1036	1039
3	Lime	520	523	1	Lime	1039	1040
5	Shale	523	528	8	Oil Sand	1040	1048
72	Lime	528	600	55	Shale	1048	1103
3	Black Shale	600	603				
18	Lime	603	621				
2	Shale	621	623				
3	Black Shale	623	626				
25	Lime	626	651				
159	Shale	651	810				
3	Lime	810	813				
22	Shale	813	835				
10	Lime	835	845				
59	Shale	845	904		T.D.		1103
3	Lime	904	907		T.D. of Pipe		1101
3	Shale	907	910				
13	Lime	910	923				
13	Shale	923	936				
4	Lime	936	940				
2	Black Shale	940	942				





CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 36310

LOCATION Eureka

FOREMAN Stewart

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

FIELD TICKET & TREATMENT REPORT

CEMENT MA 15-207-28069

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-13-12	4950	Hammond E 8-12	8	24S	16E	Woodson
CUSTOMER <u>Pigna Petroleum</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>1331 Xylan Rd</u>			<u>485</u>	<u>Alan m.</u>		
CITY <u>Pigna</u>			<u>515</u>	<u>Colin</u>		
STATE <u>KS</u>		ZIP CODE				

JOB TYPE Logging HOLE SIZE _____ HOLE DEPTH 1103' CASING SIZE & WEIGHT _____
 CASING DEPTH 1099' DRILL PIPE _____ TUBING 2 3/4 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 6.3 bbls DISPLACEMENT PSI 500 MIX PSI Bump Plug 1000 RATE _____

REMARKS: Safety Meeting. Rig up to 2 3/8 tubing. Break circulation with 5 bbls Freshwater. Pump 300* Gel Flush + 5 bbls Freshwater. Mix 160 sks 60/40 Poz mix Cement w/ 5* Kal-Seal. 4% Gel + 1% Cacl2. Shut down wash out Pump + lines. 5 tub 2 plugs. Displace with 6.3 bbls Fresh water. Final Pumping Pressure 500. Bump plug 1000. Bleed pressure down to 500. Shut well in. Good Cement Return to surface 3 1/2 bbls Slurry to pit.
Job complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5402	40	MILEAGE	4.00	160.00
1171	140 sks	60/40 Poz mix Cement	12.55	1757.00
110A	560 #	Kal-Seal 5% pozix	.46	257.60
118B	480 #	Gel 4%	.21	100.80
1102	120 #	Cacl2 1%	.74	88.80
118B	300 #	Gel Flush	.21	63.00
5407	602 Tons	Ton mileage Bulk Truck	MISC	350.00
4402	2	2 1/2 Tap Rubber Plug	28.00	56.00
			Sub Total	3863.20
			SALES TAX 2.9%	169.59
			ESTIMATED TOTAL	4032.79

AUTHORIZATION [Signature] TITLE _____ 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

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

48-12
Hammond "E"
3RD well

TICKET NUMBER 56760
FIELD TICKET REF # 47388
LOCATION Thayer
FOREMAN Brett Busby

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-29-12		Hammond #	28.2	245	16E	W.O.
CUSTOMER Piqua Petro, Inc.			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			476	Josh	4877103	Stan
CITY			490	Donnie	618795	Marvin
STATE			478	Tim		
ZIP CODE			582	Wes		
WELL DATA			424	Eric		
			4887102	STANLEY		

CASING SIZE	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE <u>2 1/8 REG</u>	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
<u>1040.5 - 50.5 (21) Squirrel</u>	

TYPE OF TREATMENT	
<u>Acid spot + frac w/acid OIS</u>	
CHEMICALS	
<u>KOLSUB - Biocide - Breaker</u>	
<u>Acid - Inhibitor - Stim Oil</u>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
PAD	20	20				BREAKDOWN 1300
20:40		20		300#		START PRESSURE
12:20						END PRESSURE
-12:20				2700#		BALL OFF PRESS
Bio-balls (5)		20				ROCK SALT PRESS
12:20				1500#		ISIP 550
12:20					2300	5 MIN
Bio-balls (3) + (2)		20-17				10 MIN
12:20		18				15 MIN
-12:20		18		1500#		MIN RATE
FLUSH CASING	10	18				MAX RATE
Release balls to D.			TOTAL	6,000#		DISPLACEMENT 6.1
OVERFLUSH	15	16-20	SAND		1550	
TOTAL BLS	150					

REMARKS:
Spotted 75 gal. -15% HCL acid on perfs

Location 12:00PM - 1:00PM 50 miles

AUTHORIZATION [Signature] TITLE _____ DATE 3-29-12

Terms and Conditions are printed on reverse side.

