



KANSAS CORPORATION COMMISSION 1086669
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) 468-2681
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 #: _____
04/17/2012 04/18/2012 06/21/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-001-30359-00-00
Spot Description: _____
NW NE SW SE Sec. 14 Twp. 24 S. R. 17 East West
1140 Feet from North / South Line of Section
1940 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Allen
Lease Name: Stranghomer Well #: 2-12
Field Name: _____
Producing Formation: Mississippi
Elevation: Ground: 1021 Kelly Bushing: 0
Total Depth: 1253 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 21 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 21
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 Garbar Date: 07/09/2012



1086669

Operator Name: Piqua Petro, Inc. Lease Name: Stranghorner Well #: 2-12
 Sec. 14 Twp. 24 S. R. 17 East West County: Allen

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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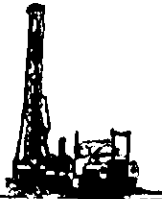
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12	7	20	21	Regular	8	
Longstring	5.625	2.875	6.5	1251	OWC	135	

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	-			

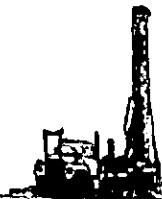
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	1206.5 to 1212.5 w/ 13 Shots		

TUBING RECORD: Size: <u>1</u> Set At: <u>1204</u> Packer At: _____	Liner Run: <input type="checkbox"/> Yes <input 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 (Explain) _____
Estimated Production Per 24 Hours	Oil Bbbs. Gas Mcf Water Bbbs. 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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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LEIS OIL SERVICES



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

Operator License #: 30345	API #: 15-001-30359-00-00
Operator: Piqua Petro, Inc.	Lease: Stranghomer
Address: 1331 Xylan Rd Piqua, KS 66761	Well #: 2-12
Phone: 620.433.0099	Spud Date: 4/17/12 Completed: 4/18/12
Contractor License: 32079	Location: NW-NE-SW-SE of 14-24S-17E
T.D. : 1253 T.D. of Pipe: 1251	1140 Feet From South
Surface Pipe Size: 7" Depth: 21'	1940 Feet From East
Kind of Well: Oil	County: Woodson

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
6	Soil	0	6	11	Shale	758	769
2	Clay	6	8	4	Lime	769	773
4	Lime	8	12	18	Shale	773	791
1	Gravel	12	13	28	Lime	791	819
45	Lime	13	58	3	Shale	819	822
110	Shale	58	168	3	Lime	822	825
15	Lime	168	183	41	Shale	825	866
8	Shale	183	191	1	Lime	866	867
2	Lime	191	193	13	Broken Sand	867	880
19	Shale	193	212	302	Shale	880	1182
55	Lime	212	267	1	Coal	1182	1183
30	Shale	267	297	7	Shale	1183	1190
3	Lime	297	300	17	Lime	1190	1207
39	Shale	300	339	2	Oil Break	1207.5	1209
72	Lime	339	411	44	Lime	1209	1253
2	Shale	411	413				
2	Black Shale	413	415				
24	Lime	415	439				
3	Black Shale	439	442				
19	Lime	442	461				
179	Shale	461	640		T.D.		1253
3	Lime	640	643		T.D. of Pipe		1251
19	Shale	643	662				
9	Lime	662	671				
66	Shale	671	737				
3	Lime	737	740				
5	Shale	740	745				
13	Lime	745	758				

Leis Oil Services, LLC

1410 150th Rd
Yates Center, KS 66783

Invoice

Number: 1001

Date: May 14, 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

Date	Description	Hours	Rate	Amount
4-12-12	Drill pit	1.00	100.00	100.00
4-12-12	cement for surface	10.00	12.60	126.00
4-13-12	Drilled Sovoboda 33-11	1,233.00	6.25	7,706.25
4-13-12	Drill pit	1.00	100.00	100.00
4-13-12	cement for surface	10.00	12.60	126.00
4-16-12	Drilled Sovoboda 34-11	1,236.00	6.25	7,725.00
4-17-12	Drill pit	1.00	100.00	100.00
4-17-12	cement for surface	8.00	12.60	100.80
4-18-12	drilled Stranghorner 2-12	1,253.00	6.25	7,831.25
4-19-12	Drill pit	1.00	100.00	100.00
4-20-12	cement for surface	10.00	12.60	126.00
4-20-12	Drilled Hammond E 6-12	1,116.00	6.25	6,975.00
4-23-12	Drill pit	1.00	100.00	100.00
4-24-12	cement for surface	8.00	12.60	100.80
4-24-12	Drilled Wingrave 59-12	1,073.00	6.25	6,706.25

0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$44,917.90	\$0.00	\$0.00	\$0.00	\$44,917.90





CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 36443

LOCATION Cunks

FOREMAN Stella Mena

PO Box 884, Chanute, KS 66720
620-431-8210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT

15-091-30359

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-19-13	4950	Siranghacac # 212				Allen
CUSTOMER						
Pigaa Petroleum						
MAILING ADDRESS						
1331 Xylan Rd						
CITY						
Piquette						
STATE						
KS						
ZIP CODE						
TRUCK #						
DRIVER						
TRUCK #						
DRIVER						
485						
Alan m						
515						
Derek						

JOB TYPE Long string HOLE SIZE _____ HOLE DEPTH 1253' CASING SIZE & WEIGHT _____
 CASING DEPTH 725' DRILL PIPE _____ TUBING 2 3/8" OTHER _____
 SLURRY WEIGHT 12.1" SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 285 bbl DISPLACEMENT PSI 500* MIX PLUG 1800" RATE _____

REMARKS: Safety meeting. Rig up to 2 3/8" tubing. Break circulation w/ Fresh water. Pump 300* Gel flush + 5 bbl water spacer. Mix 90 sks OWS cement w/ 5" phenosol. Pull at 12.1" pipe. Shut down Washout Pump & lines. STUFF 2 plugs. Displace with 285 bbl Freshwater. Final pumping pressure 500* Pump plug 1800". Shutwell in 600* second cement Return to surface. 6 bbl slurry to PT. 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
5406	45	MILEAGE	4.00	180.00
1126	135 sks	OWS Cement	18.80	2538.00
1107A	68"	Phenosol 5"	1.29	87.72
1118B	300*	Gel Flush	.21	63.00
5407A	7.02 ton		1.34	423.31
4402	2	2 3/8" Tap Rubber Plugs	28.00	56.00
			Sub Total	4978.03
			SALES TAX	207.23
			ESTIMATED TOTAL	4585.26

AUTHORIZATION [Signature]

249190

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.