



KANSAS CORPORATION COMMISSION 1096724
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 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 #: _____

<u>08/22/2012</u>	<u>08/23/2012</u>	<u>09/22/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-207-28268-00-00

Spot Description: _____
SW NE NE NW Sec. 31 Twp. 25 S. R. 14 East West
510 Feet from North / South Line of Section
2130 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Woodson
Lease Name: Town Well #: 4-12

Field Name: _____
Producing Formation: Cattleman

Elevation: Ground: 991 Kelly Bushing: 0
Total Depth: 1357 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 Gombor Date: 10/15/2012



1096724

Operator Name: Piqua Petro, Inc. Lease Name: Town Well #: 4-12
 Sec. 31 Twp. 25 S. R. 14 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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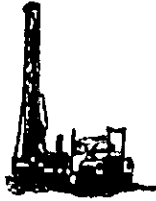
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12	7	20	41	Regular	8	
Longstring	5.625	2.875	6.5	1353	60/40 Poz, OWC	150	

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	-			

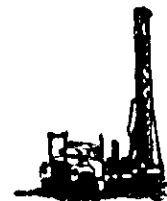
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
2	1307 to 1317 w/ 21 shots		

TUBING RECORD: Size: _____ Set At: _____ 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 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)</i> <i>(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 #: 15-207-28268-00-00
Operator: Piqua Petro, Inc.	Lease: Town
Address: PO Box 223 Yates Center, KS 66783	Well #: 4-12
Phone: (620) 433-0099	Spud Date: 8/22/12 Completed: 8/23/12
Contractor License: 32079	Location: SW-NE-NE-NW of 31-25-14E
T.D. : 1357 T.D. of Pipe: 1353	510 Feet From North
Surface Pipe Size: 7" Depth: 41'	2130 Feet From West
Kind of Well: Oil	County: Woodson

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
20	Soil/Clay	0	20	3	Lime	1086	1089
1	Lime	20	21	20	Shale	1089	1109
116	Shale	21	137	18	Lime	1109	1127
3	Lime	137	140	8	Shale	1127	1135
5	Shale	140	145	6	Lime	1135	1141
4	Lime	145	149	66	Shale	1141	1207
165	Shale	149	314	3	Lime	1207	1210
5	Lime	314	319	10	Shale	1210	1220
8	Shale	319	327	2	Lime	1220	1222
102	Lime	327	429	80	Shale	1222	1302
3	Shale	429	432	5	Sandy Shale	1302	1307
72	Lime	432	504	5	Sand light odor	1307	1312
25	Shale	504	529	5	Sand odor bleed	1312	1317
57	Lime	529	586	36	Shale	1317	1353
60	Shale	586	646				
80	Lime	646	726				
4	Black Shale	726	730				
4	Lime	730	734				
8	Lime/ oil show	734	742				
54	Lime	742	796				
145	Shale	796	941				
8	Lime	941	949				
24	Shale	949	973				
9	Lime	973	982		T.D.		1357
79	Shale	982	1061		T.D. of Pipe		1353
4	Lime	1061	1065				
12	Shale	1065	1077				
2	Lime	1077	1079				
7	Shale	1079	1086				

Lels Oil Services, LLC

1410 150th RD
Yates Center, KS 66783

Invoice

Number: 1001

Date: September 09, 2012

Bill To:

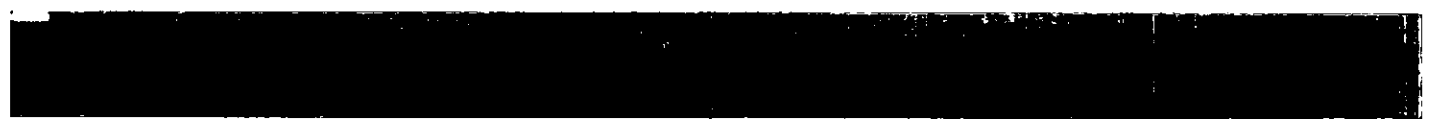
Greg Lair
Piqua Petro
1331 Xylan Rd
Piqua, KS 66761

Ship To:

Greg Lair
Piqua Petro
1331 Xylan Rd
Piqua, KS 66761

PO Number	Terms	Project
		Town - Nordmeyer

Date	Description	Hours	Rate	Amount
8-22-12	Drill pit	100.00	1.00	100.00
8-22-12	cement for surface	8.00	12.60	100.80
8-24-12	Drilling for Town 4-12	1,357.00	6.25	8,481.25
				100.00





ENTERED

TICKET NUMBER 37800
 LOCATION Eureka
 FOREMAN Steve Mead

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
8-24-12	4950	Town 4-12				Woodson

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Piqua Petroleum	485	Alan		
MAILING ADDRESS	479	Macla		
1731 Xylan Rd	611	Joey		
CITY	637	Jim		
Piqua				
STATE				
Ks				
ZIP CODE				

JOB TYPE Langstring HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH 1355' DRILL PIPE _____ TUBING 2 3/8" OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING _____
 DISPLACEMENT 7.85 bbl DISPLACEMENT PSI 200* Bump plug 1200* RATE _____

REMARKS: Safety Meeting - Rig up to 2 3/8 Tubing. Break circulation w/ Fresh water. Pump 500* Gel Flush & 800 bbls Freshwater spacer. Mix 60/40 poemix Cement w/ 6% Gel + 1" phenoseal per/sk. Tail in with 500 sks GWC Cement w/ 5" Kal-Seal + 1" phenoseal per/sk. Shut down. Washout pump lines. Stuff & plug. Displace with 7.85 bbls Freshwater. Final pumping Pressure 200* Bump Plugs to 1200*. Shut well in 500*. Good cement to surface 2 bbls to pit. Job complete Rig down.

Thank you

ACCOUNT CODE	QUANTITY of UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5461	1	PUMP CHARGE	1030.00	1030.00
5406	20	MILEAGE	4.00	80.00
1131	100 sks	60/40 poemix Cement	12.55	1255.00
1118B	500*	6% Gel	.21	105.00
1197A	100*	1" phenoseal per/sk	1.29	129.00
1126	500 sks	GWC Cement	18.80	940.00
1190A	230*	Kal Seal 5" per/sk	1.46	115.00
1197A	50*	1" phenoseal per/sk	1.29	64.50
1118B	500*	Gel Flush	.21	105.00
5407	6.95 hrs	Tractor/Bulldozer Bulk Truck	MIC	350.00
4402	2	2 3/8 Tap Rubber Plug	28.00	56.00
5502C	3 hrs	800 bbl vacuum Truck	90.00	270.00
1123	3000 gallons	CITY water	16.50	49.50
			SubTotal	4549.00
			SALES TAX	205.81
			ESTIMATED TOTAL	4754.81

Rev 1/3/77

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.