



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

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 #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

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

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ 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 #: _____

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: _____ Date: _____



1060047

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input 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
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CASING RECORD <input 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

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

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

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Lario Oil & Gas Company
Well Name	Messmer-Shipley Unit 1-24
Doc ID	1060047

Tops

Name	Top	Datum
Heebner	2812	-1418
Stalnaker	3199	-1772
KC	3383	-1956
Stark Sh	3506	-2079
Cherokee Sh	3791	-2364
Mississippian	3985	-2558
Kinderhook	4332	-2905
Simpson	4448	-3021

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

August 02, 2011

Jay Schweikert
Lario Oil & Gas Company
301 S MARKET ST
WICHITA, KS 67202-3805

Re: ACO1
API 15-095-22226-00-00
Messmer-Shibley Unit 1-24
N/2 Sec.24-29S-05W
Kingman County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Jay Schweikert

QUALITY WELL SERVICE INC

324 SIMPSON
PRATT KS 67124

Invoice

Date	Invoice #
7/22/2011	230

Bill To
Lairo Oil & Gas Co 301 S Market St. Wichita, KS 67202

Meesmer Shipley Unit # 1-24 (AFE # 11208)

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
162	COMMON	12.50	2,025.00T
108	POZ	7.00	756.00T
5	GEL	20.00	100.00T
9	CALCIUM	45.00	405.00T
68	FLO-SEAL	2.00	136.00T
1	WOODEN PLUG	65.00	65.00T
284	HANDLING	2.10	596.40
5,500	.08 * SACKS * MILES	0.08	440.00
1	SFC 0-500'	600.00	600.00
50	PUMP TRUCK MILEAGE	8.00	400.00
1,046.1	DISCOUNT	-1.00	-1,046.10T
610.92	DISCOUNT	-1.00	-610.92
	DISCOUNT EXPIRES AFTER 30 DAYS FROM THE DATE OF THE INVOICE	0.00	0.00
	MESSMER-SHIPLEY 1-24		
	Sales Tax KINGMAN	6.30%	153.78

		<i>xe</i>		OK TO	
Acc	Exp	File			
GC					
KG					
	AUG	4	2011	DR	
HV				LMA	
PV				DM	
CD	JS	KE	GV	SF	DM
		<i>ye</i>			

OK TO PAY				
Acc	Exp	File		
GC				
KG				
	JUL	27	2011	DR
HV				MM
PV				DM
CD	JS	KE	GV	SF

BS
8-2-11

Thank you for your business.	Total	\$4,020.16
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QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

5229

Home Office 190th US 56 HWY, Ellinwood, KS 67526

Todd's Cell 620-388-5422
Darin's Cell 785-445-2686

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	7-25-11	Sec.	24	Twp.	27	Range	5	County	KIRKSPT	State	KS	On Location		Finish	2:00 PM
Lease	Well No.		1-24		Location		POCUMICK KS 1E 10 Rd 100								
Contractor								Owner							
Type Job								To Quality Well Service, Inc.							
Hole Size								You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
Csg.								Charge To							
Tbg. Size								Street							
Tool								City							
Cement Left in Csg.								State							
Meas Line								The above was done to satisfaction and supervision of owner agent or contractor.							
EQUIPMENT								Cement Amount Ordered							
Pumptrk								3 1/2" 114 cells							
Bulktrk								Common							
Bulktrk								Poz. Mix							
Pickup								Gel.							
JOB SERVICES & REMARKS								Calcium							
Rat Hole								Hulls							
Mouse Hole								Salt							
Centralizers								Flowseal							
Baskets								Kol-Seal							
D/V or Port Collar								Mud CLR 48							
RAN 7 JTS 5 1/4 2 1/2"								CFL-117 or CD110 CAF 38							
CEMENT CIRC								Sand							
GOOD CIRC THROUGH JOB								Handling							
								Mileage							
								FLOAT EQUIPMENT							
								Guide Shoe							
								Centralizer							
								Baskets							
								AFU Inserts							
								Float Shoe							
								Latch Down							
								5 1/2" wooden plug							
								Pumptrk Charge							
								Mileage							
								Tax							
								Discount							
								Total Charge							
Signature															

QUALITY WELL SERVICE INC

324 SIMPSON
PRATT KS 67124

Invoice

Date	Invoice #
7/29/2011	238

Bill To
Lairo Oil & Gas Co 301 S Market St. Wichita, KS 67202

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
87	COMMON	12.50	1,087.50T
58	POZ	7.00	406.00T
5	GEL	20.00	100.00T
150	HANDLING	2.10	315.00T
5,000	.08 * SACKS * MILES	0.08	400.00T
1	PLUG	600.00	600.00T
50	PUMP TRUCK MILEAGE	8.00	400.00T
496.28	DISCOUNT	-1.00	-496.28T
	DISCOUNT EXPIRES AFTER 30 DAYS FROM THE DATE OF THE INVOICE	0.00	0.00
	MESSMER-SHIPLEY 1-24 (AFR #11208)		
	Sales Tax KINGMAN	6.30%	177.17

OK TO PAY			
Acct	Expt	File	
GC			
KG			DR
HY			MM
PV			DM
OD			
AUG 1 2011			

Acct	Expt	File	
GC			
KG			DR
HY			MM
PV			DM
OD			
AUG 2011			

BS
8-3-11

Thank you for your business.	Total	\$2,989.39
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QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

5230

Home Office 190th US 56 HWY, Ellinwood, KS 67526

Todd's Cell 620-388-5422
Darin's Cell 785-445-2686

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	7-29-11	Sec.	24	Twp.	29	Range	5	County	KINGMAN	State	KS	On Location		Finish	1:45 AM
Lease	MAVERICK 106			Well No.	1-24			Location	1/4 SEC 24, TWP 29, R 5 N E 1/4						
Contractor	MAVERICK 106							Owner	To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.						
Type Job	PTA							T.D.							
Hole Size	7 7/8							Depth	Charge To LARIO OIL & GAS						
Csg.								Depth	Street						
Tbg. Size								Depth	City						
Tool								Depth	State						
Cement Left in Csg.								Shoe Joint	The above was done to satisfaction and supervision of owner agent or contractor.						
Meas Line								Displace	Cement Amount Ordered 145 60/40 4 1/2						

EQUIPMENT

Pumptrk	5	No.	BLP	Common	87
Bulktrk	4	No.	TRK	Poz. Mix	58
Bulktrk		No.		Gel.	5
Pickup		No.	TRK	Calcium	

JOB SERVICES & REMARKS

Rat Hole		Hulls	
Mouse Hole		Salt	
Centralizers		Flowseal	
Baskets		Kol-Seal	
D/V or Port Collar		Mud CLR 48	
		CFL-117 or CD110 CAF 38	

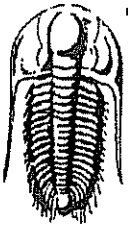
1 st Plug @ 560' 35 5/8"	Sand	
60/40 4 1/2 DISP 9.3 BBL	Handling	150
	Mileage	50

FLOAT EQUIPMENT

2 nd Plug @ 390' 35 5/8"	Guide Shoe	
60/40 4 1/2 DISP 7.7 BBL	Centralizer	
	Baskets	
3 rd Plug @ 60' 25 5/8"	AFU Inserts	
60/40 4 1/2	Float Shoe	
RAT HOLE 30 5/8" 60/40	Latch Down	
4 1/2"		
MOUSE HOLE 30 5/8" 60/40		
4 1/2"		

TANK FILL	Pumptrk Charge	PTA
PLEASE CALL PERM	Mileage	50

Signature	Tax	
	Discount	
	Total Charge	



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Lario Oil & Gas Co.

301 S. Market St
Wichita, Ks 67202

ATTN: Macklin Armstrong

Messmer-Shipley Unit #1-24

24-29-5 Kingman, Ks

Job Ticket: 44155

DST#: 1

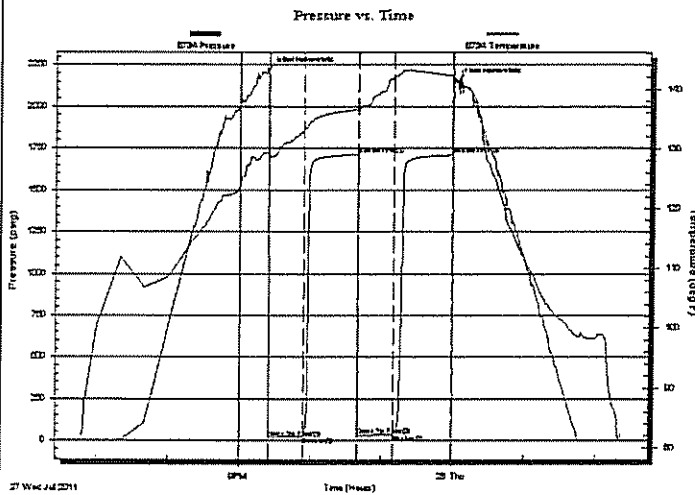
Test Start: 2011.07.27 @ 18:47:48

GENERAL INFORMATION:

Formation: **Simpson Sand**
 Deviated: **No Whipstock** ft (KB)
 Time Tool Opened: 21:24:48
 Time Test Ended: 02:21:48
 Interval: **4445.00 ft (KB) To 4455.00 ft (KB) (TVD)**
 Total Depth: **4455.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: **Good**
 Test Type: **Conventional Bottom Hole**
 Tester: **Brian Fairbank**
 Unit No: **41**
 Reference Elevations: **1427.00 ft (KB)**
1417.00 ft (CF)
 KB to GR/CF: **10.00 ft**

Serial #: 8734 Outside
 Press@RunDepth: **38.61 psig @ 4447.00 ft (KB)** Capacity: **8000.00 psig**
 Start Date: **2011.07.27** End Date: **2011.07.28** Last Calib.: **2011.07.28**
 Start Time: **18:47:49** End Time: **02:21:48** Time On Blrm: **2011.07.27 @ 21:23:48**
 Time Off Blrm: **2011.07.28 @ 00:01:48**

TEST COMMENT: IFP - weak blow throughout sur 1 1/4"
 ISI - no blow back
 FFP - no blow
 FSI - no blow back



PRESSURE SUMMARY

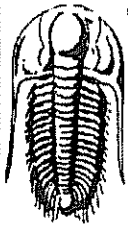
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2218.38	129.33	Initial Hydro-static
1	14.01	127.97	Open To Flow (1)
30	26.42	133.21	Shut-In(1)
76	1711.78	136.52	End Shut-In(1)
77	27.35	136.08	Open To Flow (2)
107	38.61	141.83	Shut-In(2)
155	1708.48	142.21	End Shut-In(2)
158	2148.51	141.57	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
45.00	MW w/ scum O in tool 50%w, 50%r	0.63

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil & Gas Co.

Messmer-Shipley Unit #1-24

301 S. Market St
Wichita, Ks 67202

24-29-5 Kingman, Ks

Job Ticket: 44155

DST#: 1

ATTN: Macklin Armstrong

Test Start: 2011.07.27 @ 18:47:48

Mud and Cushion Information

Mud Type: Gel Chem
Mud Weight: 10.00 lb/gal
Viscosity: 48.00 sec/qt
Water Loss: 8.39 in³
Resistivity: ohm.m
Salinity: 3800.00 ppm
Filter Cake: inches

Cushion Type:
Cushion Length: ft
Cushion Volume: bbl
Gas Cushion Type:
Gas Cushion Pressure: psig

Oil API: deg API
Water Salinity: 44000 ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
45.00	MW w / scum O in tool 50%w, 50%m	0.631

Total Length: 45.00 ft Total Volume: 0.631 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

