



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1095330
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

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
- Plug Back Conv. to GSW Conv. to Producer
- 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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1095330

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

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

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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

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	Parsons Trust 1-8
Doc ID	1095330

Tops

Name	Top	Datum
Heebner	3968	-993
Lansing	4009	-1034
Stark Shale	4239	-1264
Hushpuckney	4274	-1299
Base KC	4311	-1336
Marmaton	4354	-1379
Pawnee	4443	-1468
Ft. Scott	4469	-1494
Johnson	4565	-1590
Morrow	4585	-1610
Mississippian	4623	-1648
Spergen	4692	-1717

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
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

October 15, 2012

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

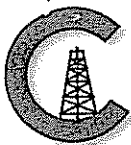
Re: ACO1
API 15-109-21131-00-00
Parsons Trust 1-8
NW/4 Sec.08-13S-32W
Logan County, Kansas

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



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 253487

Invoice Date: 10/09/2012 Terms: 10/10/30,n/30

Page 1

LARIO OIL & GAS
P.O. BOX 1093
GARDEN CITY KS 637846
(316)265-5611

PARSONS 1-8
37222
8-13-31
10-7-2012
KS

Drilling AFE 12-285
CR 10/11/12

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	220.00	15.1000	3322.00
1118B	PREMIUM GEL / BENTONITE	757.00	.2500	189.25
1107	FLO-SEAL (25#)	55.00	2.8200	155.10
4432	8 5/8" WOODEN PLUG	1.00	96.0000	96.00

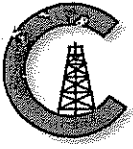
Sublet Performed	Description	Total
9996-130	CEMENT MATERIAL DISCOUNT	-376.24
9995-130	CEMENT EQUIPMENT DISCOUNT	-178.50

Description	Hours	Unit Price	Total
463 P & A NEW WELL	1.00	1325.00	1325.00
463 EQUIPMENT MILEAGE (ONE WAY)	10.00	5.00	50.00
693 MIN. BULK DELIVERY	1.00	410.00	410.00

Amount Due 5850.22 if paid after 11/08/2012

Parts:	3762.35	Freight:	.00	Tax:	272.58	AR	5265.19
Labor:	.00	Misc:	.00	Total:	5265.19		
Sublt:	-554.74	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE Invoice # 253319
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LARIO OIL & GAS
P.O. BOX 1093
GARDEN CITY KS 637846
(316)265-5611

PARSONS Tract #1-8
37155
8-13-31
09-29-2012
KS

Drilling
AFE12-285
CK 10/412

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	165.00	17.6500	2912.25
1102	CALCIUM CHLORIDE (50#)	465.00	.8900	413.85
1118B	PREMIUM GEL / BENTONITE	310.00	.2500	77.50

Sublet Performed	Description	Total
9996-130	CEMENT MATERIAL DISCOUNT	-510.54
9995-130	CEMENT EQUIPMENT DISCOUNT	-231.75

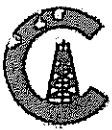
Description	Hours	Unit Price	Total
460 MIN. BULK DELIVERY	1.00	410.00	410.00
T-118 CEMENT PUMP (SURFACE)	1.00	1085.00	1085.00
T-118 EQUIPMENT MILEAGE (ONE WAY)	10.00	5.00	50.00

al
yc
OCT 9 2012
al
yc
JS

Amount Due 5222.59 if paid after 10/30/2012

Parts:	3403.60	Freight:	.00	Tax:	232.89	AR	4439.20
Labor:	.00	Misc:	.00	Total:	4439.20		
Sublt:	-742.29	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 37155
LOCATION Oakley, KS
FOREMAN Mike Shaw

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-27-12	4793	Parsons 1-8	8	13S	31W	Gove
CUSTOMER			115			
Mailing Address			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY			4527W	Sorkul		
STATE			460	Wes F		
ZIP CODE						

JOB TYPE Surface HOLE SIZE 12 1/4" HOLE DEPTH 237' CASING SIZE & WEIGHT 2 3/8" 22#
 CASING DEPTH 237' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8 SLURRY VOL 1.36 WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 12 1/2 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meetings and rig up on Martin drilling #2
Circulate casing pump 165 SWS common 32 Calcium + 2% gel displaced 12 3/4 bbls
Water Shut in Cement did Circulate 4 bbls top it

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54615	1	PUMP CHARGE	1085.00	1085.00
5460	10	MILEAGE	5.00	50.00
5467	7.70 TONS	Ton mileage delivery	410.00	410.00
11645	145 SWS	Common class A Cement	17.65	2912.25
1102	405	Calcium Chloride	.89	413.85
11188	310#	Bentonite Gel	.25	77.50
			Subtotal	4948.60
			1.58 158 discount	742.29
			Subtotal	4206.31
			SALES TAX	232.89
			ESTIMATED TOTAL	4439.20

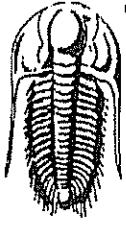
Completed

Ravin 3737

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

253319



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Lario Oil & Gas Company
 301 S. Market St,
 Wichita, Ks
 ATTN: Mac Armstrong

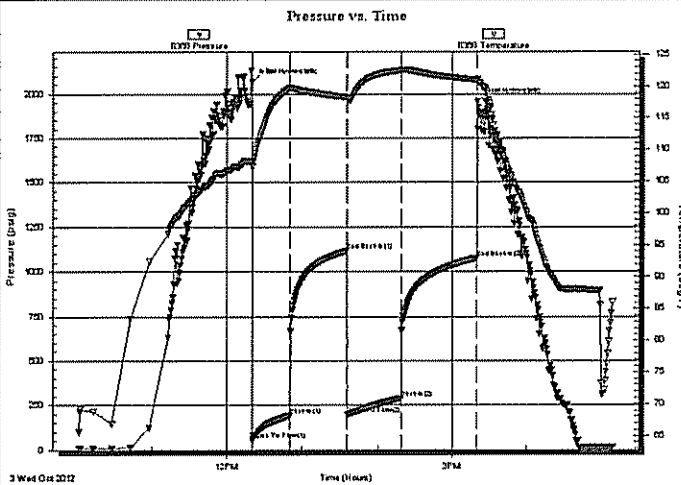
8-13s-31w Logan, Ks
Parsons Trust # 1-8
 Job Ticket: 50161 DST#: 1
 Test Start: 2012.10.03 @ 10:01:05

GENERAL INFORMATION:

Formation: D
 Deviated: No Whipstock: 0.00 ft (KB)
 Time Tool Opened: 12:20:35
 Time Test Ended: 17:25:20
 Interval: 4090.00 ft (KB) To 4120.00 ft (KB) (TVD)
 Total Depth: 4120.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Shane McBride
 Unit No: 55
 Reference Elevations: 2975.00 ft (KB)
 2968.00 ft (CF)
 KB to GR/CF: 7.00 ft

Serial #: 8368 Inside
 Press@RunDepth: 289.57 psig @ 4091.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2012.10.03 End Date: 2012.10.03 Last Calib.: 2012.10.03
 Start Time: 10:01:05 End Time: 17:10:20 Time On Btm: 2012.10.03 @ 12:20:20
 Time Off Btm: 2012.10.03 @ 15:20:35

TEST COMMENT: B.O.B. in 16 1/2 min.
 No return
 B.O.B. in 20 1/2 min.
 No return



PRESSURE SUMMARY

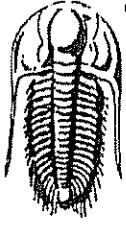
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2066.93	108.18	Initial Hydro-static
1	57.54	107.39	Open To Flow (1)
30	191.73	119.59	Shut-In(1)
76	1116.61	118.32	End Shut-In(1)
76	199.93	117.95	Open To Flow (2)
119	289.57	122.49	Shut-In(2)
180	1076.33	121.00	End Shut-In(2)
181	1956.78	120.97	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
480.00	water w/ tr of oil 100%w	4.59
70.00	o & m c w 10%o 30%m 60%w	0.98
10.00	free oil 100%o	0.14

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil & Gas Company
301 S. Market St,
Wichita ,Ks
ATTN: Mac Armstrong

8-13s-31w Logan, Ks
Parsons Trust # 1-8
Job Ticket: 50161 DST#: 1
Test Start: 2012.10.03 @ 10:01:05

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API: 33 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: 59000 ppm
Viscosity: 61.00 sec/qt	Cushion Volume: bbl	
Water Loss: 7.19 in ³	Gas Cushion Type:	
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig	
Salinity: 4000.00 ppm		
Filter Cake: 1.00 inches		

Recovery Information

Recovery Table

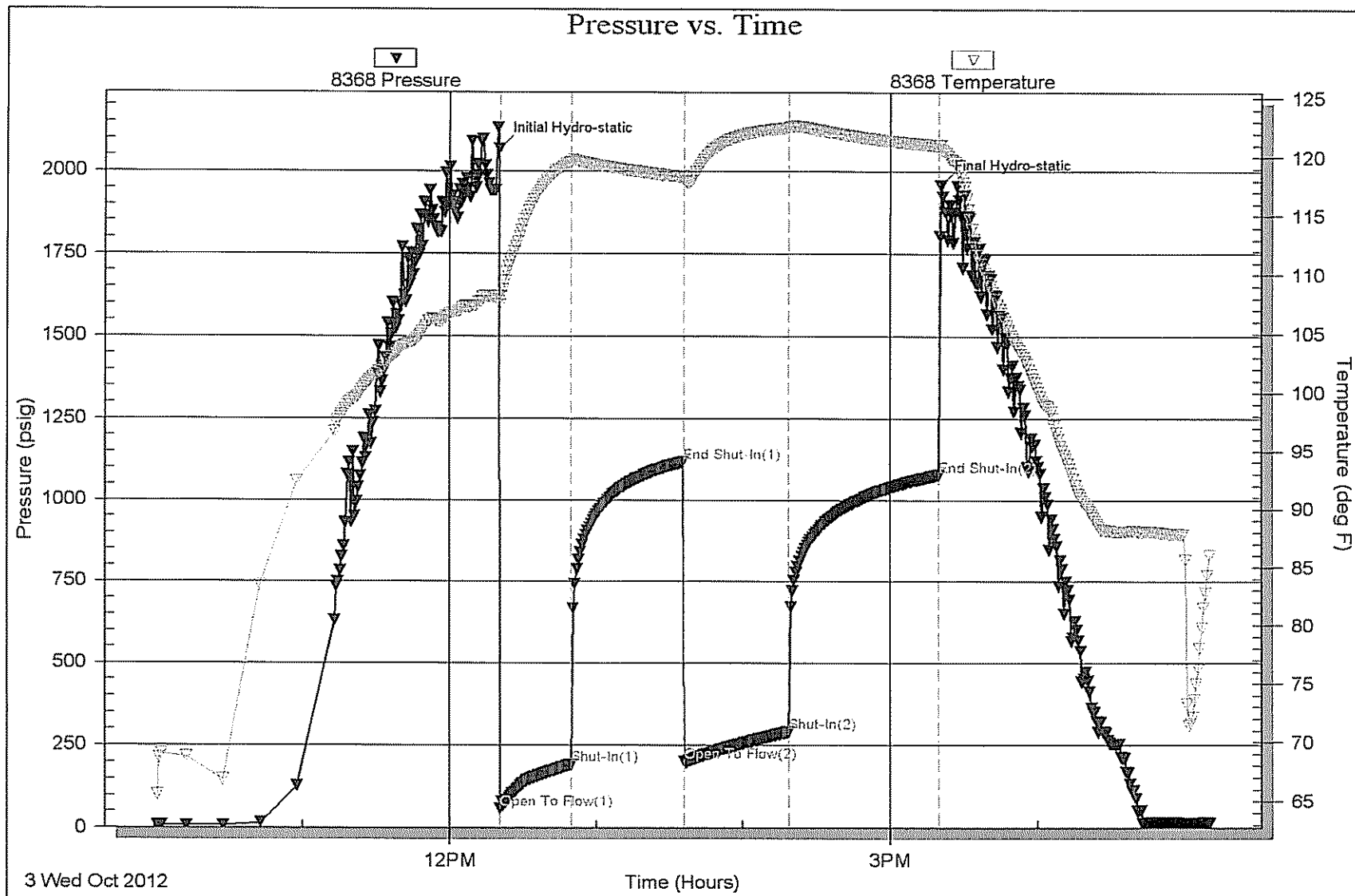
Length ft	Description	Volume bbl
480.00	water w / tr of oil 100%w	4.592
70.00	o & mc w 10%o 30%m 60%w	0.982
10.00	free oil 100%o	0.140

Total Length: 560.00 ft Total Volume: 5.714 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments: rw .092 @ 90*f = 59,000 chlor





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Lario Oil & Gas Company

8-13s-31w Logan, Ks

301 S. Market St,
Wichita, Ks

Parsons Trust # 1-8

Job Ticket: 50162

DST#: 2

ATTN: Mac Armstrong

Test Start: 2012.10.05 @ 14:41:13

GENERAL INFORMATION:

Formation: **Johnson**

Deviated: No Whipstock: 0.00 ft (KB)

Time Tool Opened: 16:26:43

Time Test Ended: 21:40:13

Test Type: Conventional Bottom Hole (Reset)

Tester: Shane McBride

Unit No: 55

Interval: 4548.00 ft (KB) To 4592.00 ft (KB) (TVD)

Total Depth: 4592.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 2975.00 ft (KB)

2965.00 ft (CF)

KB to GR/CF: 10.00 ft

Serial #: 8368

Inside

Press@RunDepth: 145.49 psig @ 4549.00 ft (KB)

Start Date: 2012.10.05

End Date:

2012.10.05

Capacity: 8000.00 psig

Last Calib.: 2012.10.05

Start Time: 14:41:13

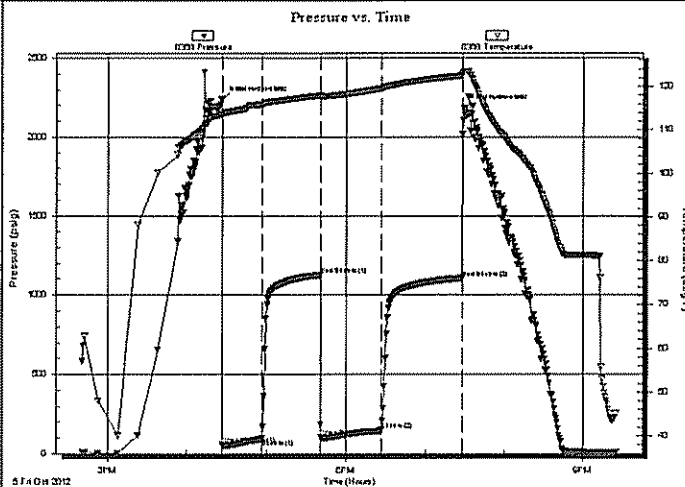
End Time:

21:25:13

Time On Btm: 2012.10.05 @ 16:26:28

Time Off Btm: 2012.10.05 @ 19:29:28

TEST COMMENT: 3" in blow
No return
4" in blow
No return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2240.08	114.19	Initial Hydro-static
1	55.66	113.54	Open To Flow (1)
30	94.58	115.86	Shut-in(1)
75	1126.26	117.94	End Shut-in(1)
75	103.59	117.62	Open To Flow (2)
120	145.49	119.55	Shut-in(2)
182	1106.06	122.51	End Shut-in(2)
183	2183.52	123.46	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
238.00	s o c m 5% o 95% m	1.20
2.00	free oil 100% o	0.03

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil & Gas Company

8-13s-31w Logan, Ks

301 S. Market St,
Wichita ,Ks

Parsons Trust # 1-8

Job Ticket: 50162

DST#: 2

ATTN: Mac Armstrong

Test Start: 2012.10.05 @ 14:41:13

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 51.00 sec/qt

Cushion Volume:

bbl

Water Loss: 7.20 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
238.00	s o c m 5%o 95%m	1.198
2.00	free oil 100%o	0.028

Total Length: 240.00 ft Total Volume: 1.226 bbl

Num Fluid Samples: 0

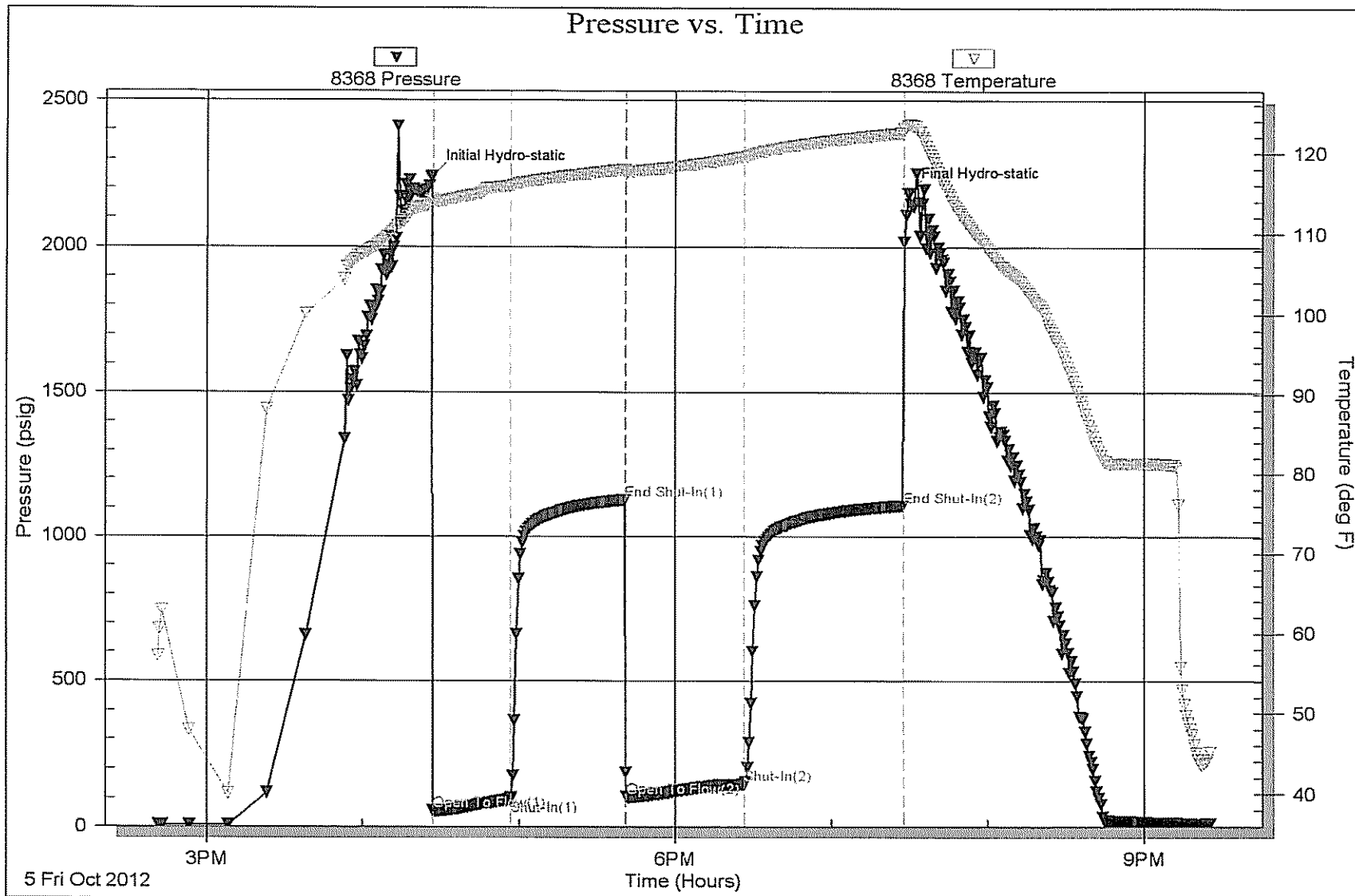
Num Gas Bombs: 0

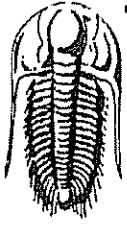
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Lario Oil & Gas Company

8-13s-31w Gove, Ks

301 S. Market St,
Wichita, Ks

Parsons Trust # 1-8

Job Ticket: 50163

DST#: 3

ATTN: Mac Armstrong

Test Start: 2012.10.06 @ 06:11:05

GENERAL INFORMATION:

Formation: **Morrow**

Deviated: No Whipstock: 0.00 ft (KB)

Time Tool Opened: 08:33:35

Time Test Ended: 13:30:05

Test Type: Conventional Bottom Hole (Reset)

Tester: Shane McBride

Unit No: 55

Interval: 4588.00 ft (KB) To 4630.00 ft (KB) (TVD)

Total Depth: 4630.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 2975.00 ft (KB)

2965.00 ft (CF)

KB to GR/CF: 10.00 ft

Serial #: 8368

Inside

Press@RunDepth: 39.51 psig @ 4589.00 ft (KB)

Start Date: 2012.10.06

End Date:

2012.10.06

Start Time: 06:11:05

End Time:

13:23:05

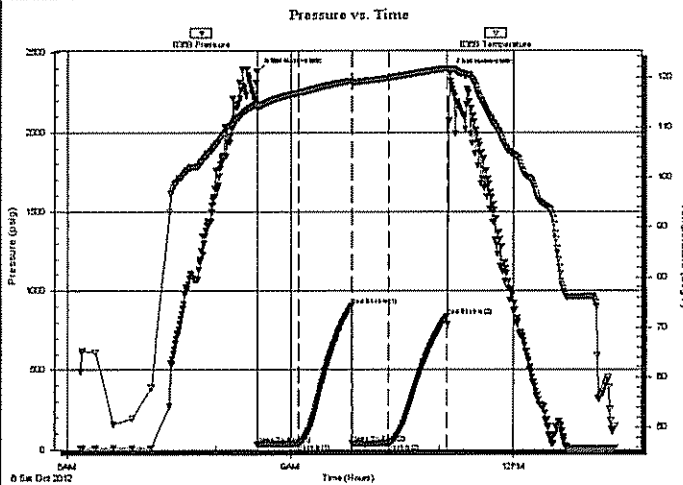
Capacity: 8000.00 psig

Last Calib.: 2012.10.06

Time On Btm: 2012.10.06 @ 08:33:20

Time Off Btm: 2012.10.06 @ 11:08:35

TEST COMMENT: 1/4" in blow died back to a weak surface blow
No return
No blow
No return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2383.62	114.59	Initial Hydro-static
1	34.68	113.82	Open To Flow (1)
33	38.91	116.77	Shut-In(1)
76	903.90	119.21	End Shut-In(1)
77	39.56	118.91	Open To Flow (2)
106	39.51	119.78	Shut-In(2)
153	842.00	121.64	End Shut-In(2)
156	2375.31	121.42	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	mud 100% m	0.02

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil & Gas Company

8-13s-31w Gove, Ks

301 S. Market St,
Wichita ,Ks

Parsons Trust # 1-8

Job Ticket: 50163

DST#: 3

ATTN: Mac Armstrong

Test Start: 2012.10.06 @ 06:11:05

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 51.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.20 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
5.00	mud 100% _m	0.025

Total Length: 5.00 ft Total Volume: 0.025 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

