



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1100679
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: _____



1100679

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 <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 List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	--	---

Form	ACO1 - Well Completion
Operator	Lario Oil & Gas Company
Well Name	Coldwater Hanna 1-23
Doc ID	1100679

Tops

Name	Top	Datum
Heebner	3876	-1029
Lansing	3915	-1068
Stark Shale	4152	-1305
Hushpuckney	4189	-1342
Base KC	4242	-1395
Marmaton	4285	-1438
Pawnee	4354	-1507
Ft. Scott	4380	-1533
Johnson	4482	-1635
Morrow	4504	-1657
Mississippian	4512	-1665
Spergen	4652	-1805

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

January 24, 2013

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

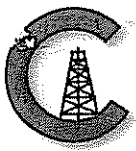
Re: ACO1
API 15-063-22045-00-00
Coldwater Hanna 1-23
NE/4 Sec.23-14S-31W
Gove County, Kansas

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 # 254490

=====
Invoice Date: 11/13/2012 Terms: 15/15/30,n/30 Page 1

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

COLDWATER HANNAH 1-23 Drilling
39134 AFE 12-293
23-14-31
11-10-2012
KS

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
463 CEMENT PUMP (SURFACE)	1.00	1085.00	1085.00
463 EQUIPMENT MILEAGE (ONE WAY)	10.00	5.00	50.00
639 MIN. BULK DELIVERY	1.00	410.00	410.00

Surf Cost

all xc

Acc't	Exp'd	File
50		
NOV 19		
all xc		

[Signature]

Amount Due 5222.59 if paid after 12/13/2012

=====
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

TICKET NUMBER 39134
LOCATION Onlay
FOREMAN Fuzz

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	
11-10-12	4793	Coldwater Hawk 1-23	23	14	31	Gove	
CUSTOMER Largo Oil & Gas		OAKLEY S-Gove Rd. 22 81125 Wit		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS				463	Conrad		
CITY		STATE		639	Tim W		
ZIP CODE							

JOB TYPE SURFACE HOLE SIZE 12 1/4" HOLE DEPTH 224' CASING SIZE & WEIGHT 8 5/8"
CASING DEPTH 224' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 14.7 SLURRY VOL 1.36 WATER gal/sk 6.5 CEMENT LEFT IN CASING 20'
DISPLACEMENT 12.9 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Monday 11/12. At 2:00 and circulate, mix 165 SKS CLASS A' cement, 2 bags, Displace 1 3/4 BALS and shut in. Cement did circulate approx 3 BALS to PIT

Thanks Fuzz & crew

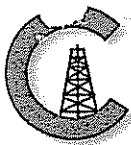
ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE	1085 ⁰⁰	1085 ⁰⁰
5406	10	MILEAGE	5 ⁰⁰	50 ⁰⁰
5407	7.8 ton	Ton mileage delivery (mil)	410 ⁰⁰	410 ⁰⁰
				2912 ²⁵
11045	165 SKS	CLASS A' cement	17 ⁵²	2880
1102	465 #	Calcium chloride	.89	413 ⁸⁵
2118B	310 #	Bentonite	.25	77 ⁵⁰
		sub total		4948 ⁶⁰
		less 1590		742 ²⁹
		sub total		4206 ³¹
		SALES TAX		232 ⁸⁹
		ESTIMATED TOTAL		4439 ²⁰

Flavin 3737

AUTHORIZATION Robert W. Nicklas 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.

254490



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 # 254782

Invoice Date: 11/26/2012 Terms: 15/15/30,n/30 Page 1

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

COLDWATER HANNA 1-23
39125
23-14-31
11-20-2012
KS

Completion
AFE 12-293
CR 11/27/12

Part Number	Description	Qty	Unit Price	Total
1126	OIL WELL CEMENT	180.00	22.5500	4059.00
1110A	KOL SEAL (50# BAG)	900.00	.5600	504.00
1131	60/40 POZ MIX	450.00	15.1000	6795.00
1118B	PREMIUM GEL / BENTONITE	3096.00	.2500	774.00
1107	FLO-SEAL (25#)	112.00	2.8200	315.84
4161	FLOAT SHOE 4 1/2" AFU	1.00	342.0000	342.00
4129	CENTRALIZER 4 1/2"	9.00	46.0000	414.00
4103	CEMENT BASKET 4 1/2"	1.00	261.0000	261.00
4453	4 1/2" LATCH DOWN PLUG	1.00	465.0000	465.00
4276	DV TOOL SIZE 4 1/2" (STA	1.00	4200.0000	4200.00
1144G	MUD FLUSH (SALE)	500.00	1.0000	500.00

Sublet Performed	Description	Total
9996-130	CEMENT MATERIAL DISCOUNT	-2794.48
9995-130	CEMENT EQUIPMENT DISCOUNT	-530.18

Description	Hours	Unit Price	Total
399 CEMENT PSI CHARGES	1.00	3020.00	3020.00
399 EQUIPMENT MILEAGE (ONE WAY)	10.00	5.00	50.00
460 TON MILEAGE DELIVERY	1.00	232.25	232.25
530 TON MILEAGE DELIVERY	1.00	232.25	232.25

Amount Due 23664.05 if paid after 12/26/2012

Parts:	18629.84	Freight:	.00	Tax:	1274.75	AR	20114.43
Labor:	.00	Misc:	.00	Total:	20114.43		
Sublt:	-3324.66	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 39125
LOCATION Oakley, KS
FOREMAN Kelly Gabe
Walt Dinkel

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

FIELD TICKET & TREATMENT REPORT
CEMENT

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
11-20-12	4743	Soldwater Hanna #1-23	23	145	31 ^W	Good	
CUSTOMER <u>L&D Oil & Gas</u>		OAKLEY 115 E Toopian 8 1/2 S W into		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS				399	Damon M		
CITY		STATE		530	Jim W		
ZIP CODE				460	Mike M		

JOB TYPE 2-5 1/2 age HOLE SIZE 7 1/8 HOLE DEPTH 4700 CASING SIZE & WEIGHT 4 1/2 10.5#
CASING DEPTH 41686' DRILL PIPE _____ TUBING 2 1/2" DU TOP #56 OTHER DU @ 2370'
SLURRY WEIGHT 142-125 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT 74 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

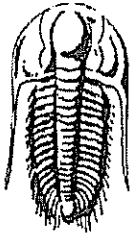
REMARKS: safety meeting, ran float equipment on ST #5 Cent. 3, 7, 11, 15, 19
23, 27, 31, 61 DU Top #56, Basket bottom 56 finished running pipe
to bottom, & circulated for 1 1/2 hrs Pumped 5 bbl water, mud
flush, 5 bbl, mixed 180 SKS OWC 5# Kal seal per SKS dropped
plug, displaced with 20 bbl water 3 1/2 wbl mud, with a lift
pressure & Plug landed @ 1150 #, dropped DU work opened tool
@ 1100 # hooked up & circulated for 3 hrs mixed 30 SKS RH
2 SKS Mt, mixed 400 SKS 60/40 Poz 80 gel 1/4 # Flo-seal, released plug
& displaced with 37 3/4 wbl water with lift 250 # & Plug landed @ 1500 #,
released pressure, float held APPROX 10 bbl top it Thank You Kelly & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401P	1	PUMP CHARGE	3020.00	3020.00
5406	10 mi	MILEAGE	5.00	50.00
1126	180 SKS	OWC	22.55	4059.00
110A	900 #	Kal-seal	.56	504.00
1131	450	60/40 Poz	15.10	6795.00
118B	3096 #	Bentonite	.25	774.00
1107	112	Flo-seal	2.82	315.84
5407A	27.81	Ton mileage delivery	1.67	464.50
4161	1	AFU Floatshoe 4 1/2 (I)	342.00	342.00
4129	9	4 1/2 centralizer (I)	46.00	414.00
4103	1	4 1/2 cement basket (I)	261.00	261.00
41453	1	4 1/2 latch down/w Plug (w)	465.00	465.00
4276	1	DU Tool (w)	4200.00	4200.00
71446	500 gal	Mud flush	1.00	500.00
<u>AS Per bid</u>				
				22,164.34
				3,324.66
				18,839.68
SALES TAX				1274.75
ESTIMATED TOTAL				20114.431

Ravin 3737
1:00 A.M. 11-21-12
AUTHORIZATION Curtis Dial TITLE Productive Foreman DATE 11-21-12

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.

254780



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Lario Oil & Gas
301 S Market St
Wichita KS 67202
ATTN: Brad Rine

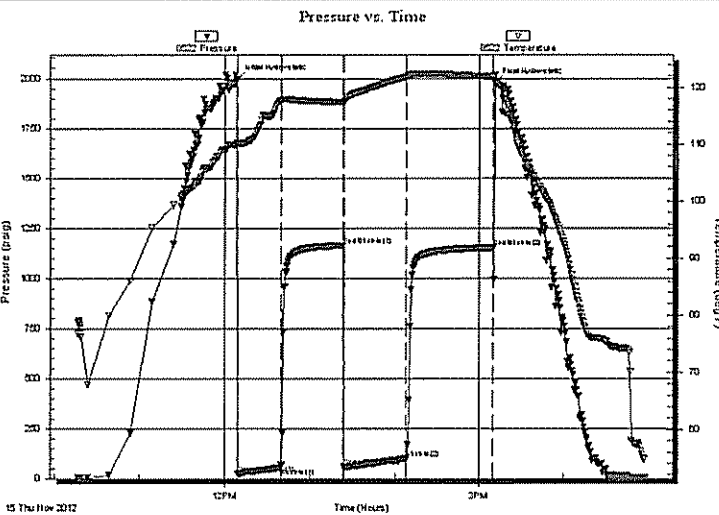
23 14s 31w Gove, Ks
Coldwater-Hanna 1-23
Job Ticket: 49769 DST#: 1
Test Start: 2012.11.15 @ 10:17:00

GENERAL INFORMATION:

Formation: LKC- "D"
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 12:09:15
Time Test Ended: 16:57:45
Interval: 3995.00 ft (KB) To 4020.00 ft (KB) (TVD)
Total Depth: 4020.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Good
Test Type: Conventional Bottom Hole (Initial)
Tester: Bradley Walter
Unit No: 53
Reference Elevations: 2847.00 ft (KB)
2837.00 ft (CF)
KB to GR/CF: 10.00 ft

Serial #: 8522 Outside
Press@RunDepth: 101.00 psig @ 3996.00 ft (KB)
Start Date: 2012.11.15 End Date: 2012.11.15
Start Time: 10:17:05 End Time: 16:57:44
Capacity: 8000.00 psig
Last Calib.: 2012.11.15
Time On Btm: 2012.11.15 @ 12:09:00
Time Off Btm: 2012.11.15 @ 15:10:45

TEST COMMENT: IF: 2 1/2" blow.
IS: No return.
FF: 2" blow.
FS: No return.



PRESSURE SUMMARY

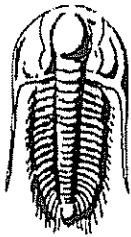
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1994.95	110.29	Initial Hydro-static
1	23.44	109.77	Open To Flow (1)
31	55.30	117.73	Shut-In(1)
75	1163.24	117.48	End Shut-In(1)
76	57.39	117.35	Open To Flow (2)
120	101.00	121.84	Shut-In(2)
181	1151.41	121.91	End Shut-In(2)
182	1977.69	122.12	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
150.00	mcw 15m 85w	0.74

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil & Gas
301 S Market St
Wichita KS 67202
ATTN: Brad Rine

23 14s 31w Gove, Ks
Coldwater-Hanna 1-23
Job Ticket: 49769 DST#: 1
Test Start: 2012.11.15 @ 10:17:00

Mud and Cushion Information

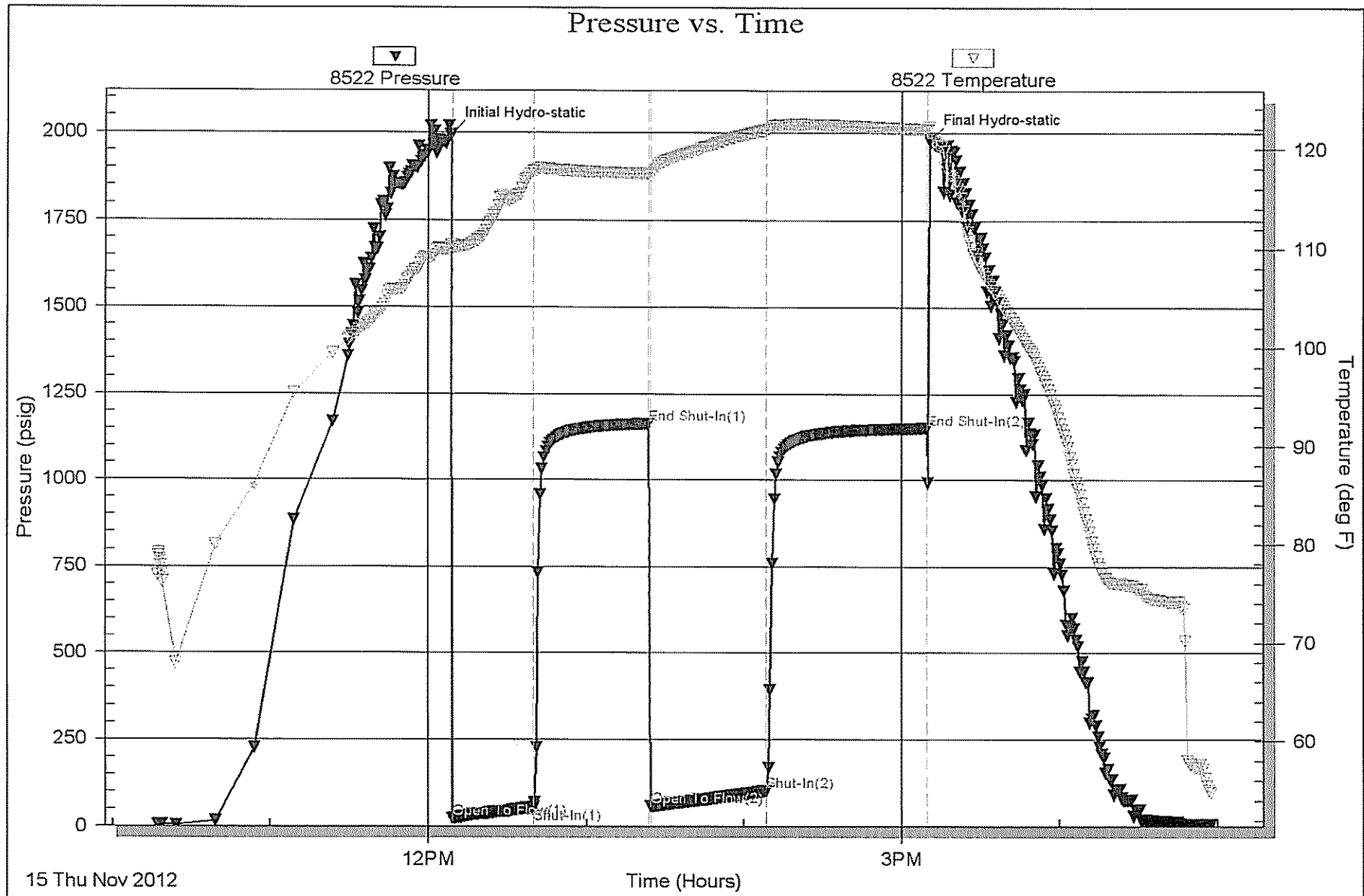
Mud Type: Gel Chem	Cushion Type:	Oil API: 0 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: 72000 ppm
Viscosity: 58.00 sec/qt	Cushion Volume: bbl	
Water Loss: 6.40 in ³	Gas Cushion Type:	
Resistivity: ohm.m	Gas Cushion Pressure: psig	
Salinity: 2000.00 ppm		
Filter Cake: 1.00 inches		

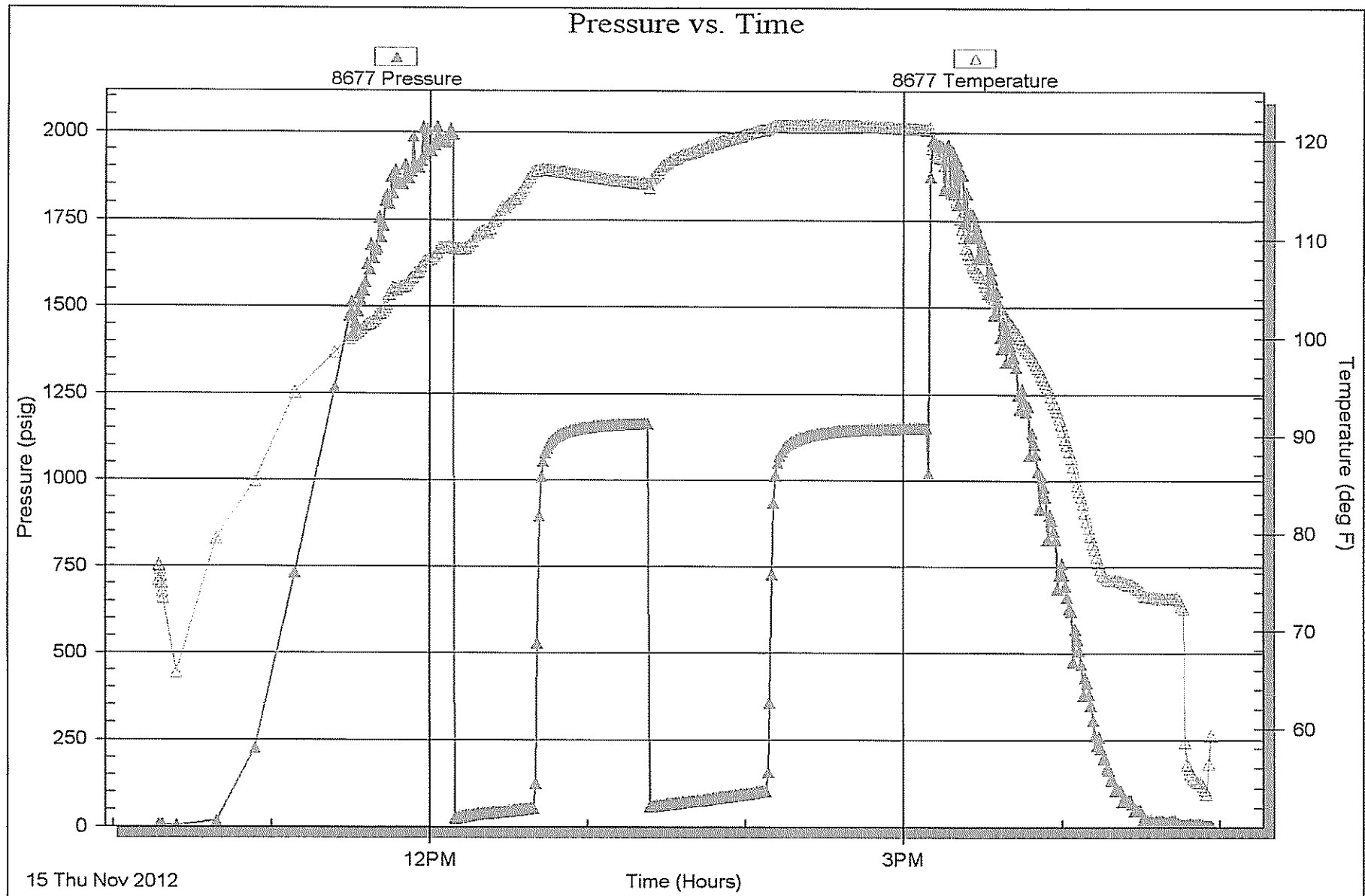
Recovery Information

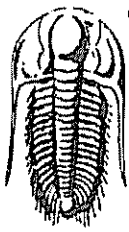
Recovery Table

Length ft	Description	Volume bbl
150.00	mcw 15m 85w	0.738

Total Length: 150.00 ft Total Volume: 0.738 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments: rw is .152 @ 51F = 72,000ppm







**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Lario Oil & Gas

301 S Market St
Wichita KS 67202

ATTN: Brad Rine

23 14s 31w Gove, Ks

Coldwater-Hanna 1-23

Job Ticket: 49770

DST#: 2

Test Start: 2012.11.16 @ 03:57:00

GENERAL INFORMATION:

Formation: LKC- "H"

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 05:49:45

Time Test Ended: 10:48:30

Test Type: Conventional Bottom Hole (Reset)

Tester: Bradley Walter

Unit No: 53

Interval: 4066.00 ft (KB) To 4110.00 ft (KB) (TVD)

Total Depth: 4110.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Good

Reference Elevations: 2847.00 ft (KB)

2837.00 ft (CF)

KB to GR/CF: 10.00 ft

Serial #: 8522

Outside

Press@RunDepth: 86.33 psig @ 4067.00 ft (KB)

Start Date: 2012.11.16

End Date:

2012.11.16

Start Time: 03:57:05

End Time:

10:48:29

Capacity: 8000.00 psig

Last Calib.: 2012.11.16

Time On Btm: 2012.11.16 @ 05:49:30

Time Off Btm: 2012.11.16 @ 08:54:15

TEST COMMENT:

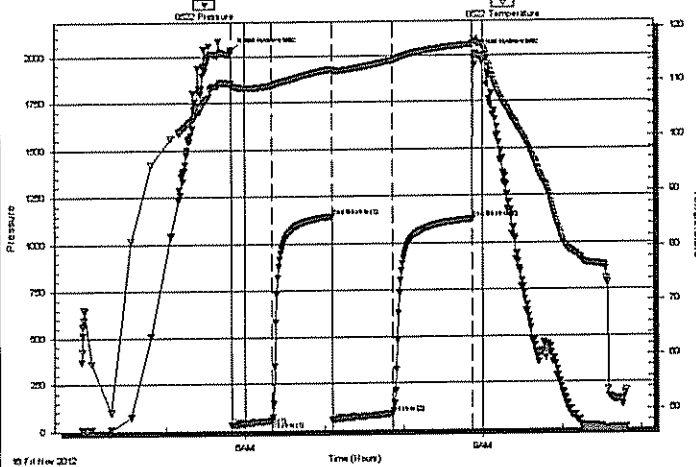
IF: 3" blow.

IS: No return.

FF: 2" blow.

FS: No return.

Pressure vs. Time



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2030.66	109.81	Initial Hydro-static
1	27.36	109.11	Open To Flow (1)
31	52.96	109.44	Shut-In(1)
77	1143.34	112.38	End Shut-In(1)
77	56.79	112.06	Open To Flow (2)
123	86.33	113.96	Shut-In(2)
183	1126.25	116.85	End Shut-In(2)
185	2006.46	117.43	Final Hydro-static

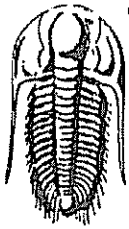
Recovery

Length (ft)	Description	Volume (bbl)
140.00	mud 100m thin (oil spots)	0.69

* 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

23 14s 31w Gove, Ks

301 S Market St
Wichita KS 67202

Coldwater-Hanna 1-23

Job Ticket: 49770

DST#: 2

ATTN: Brad Rine

Test Start: 2012.11.16 @ 03:57:00

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: 54.00 sec/qt

Cushion Volume:

bbf

Water Loss: 6.39 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 2000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbf
140.00	mud 100m thin (oil spots)	0.688

Total Length: 140.00 ft Total Volume: 0.688 bbf

Num Fluid Samples: 0

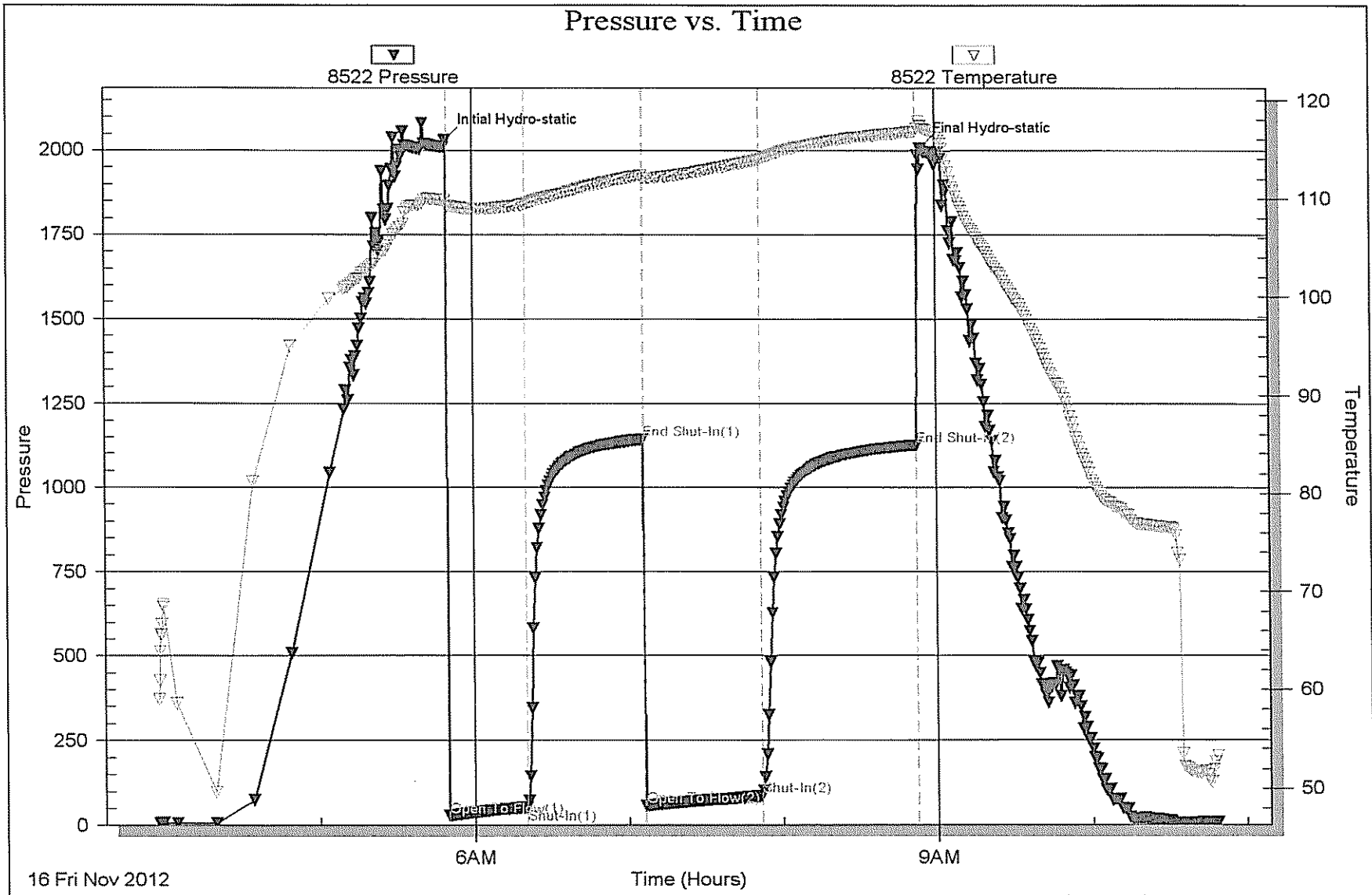
Num Gas Bombs: 0

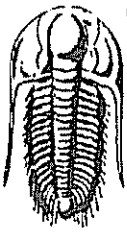
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil & Gas

23 14s 31w Gove, Ks

301 S Market St
Wichita KS 67202

Coldwater-Hanna 1-23

Job Ticket: 49771

DST#: 3

ATTN: Brad Rine

Test Start: 2012.11.16 @ 17:21:00

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:

92000 ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbf

Water Loss: 6.80 in²

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 3000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbf
130.00	mcw 15m 85w (oil spots)	0.639

Total Length: 130.00 ft Total Volume: 0.639 bbf

Num Fluid Samples: 0

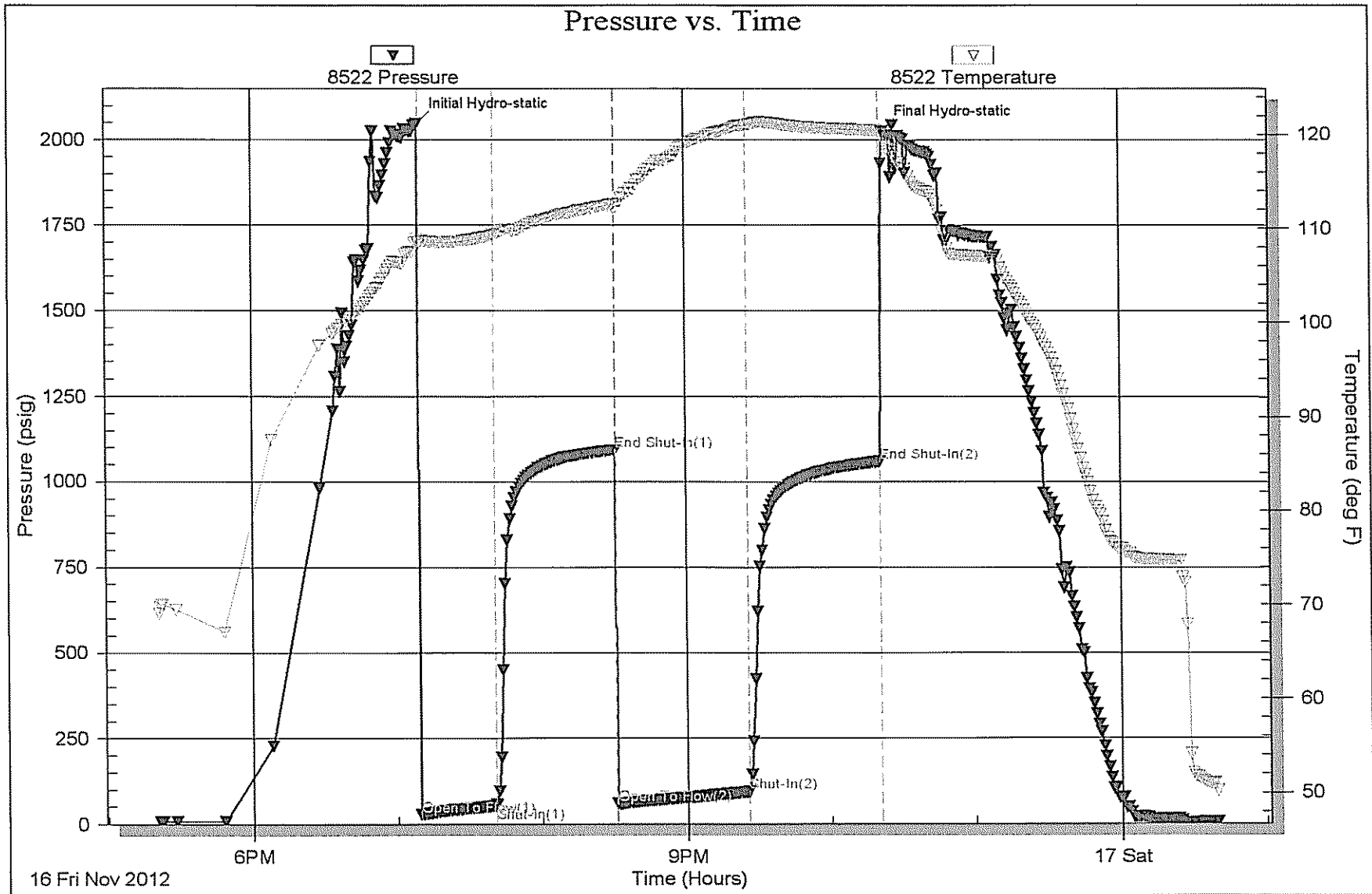
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: rw is .182 @ 49F = 92000ppm





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Lario Oil & Gas
301 S Market St
Wichita KS 67202
ATTN: Brad Rine

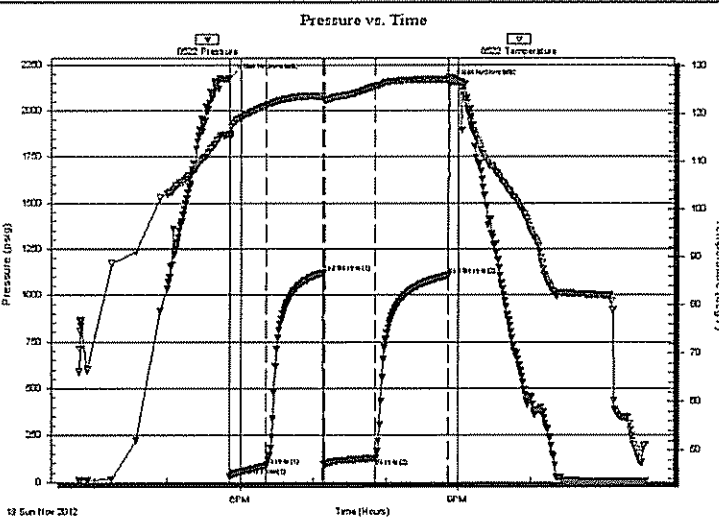
23 14s 31w Gove, Ks
Coldwater-Hanna 1-23
Job Ticket: 49772 DST#: 4
Test Start: 2012.11.18 @ 15:47:00

GENERAL INFORMATION:

Formation: **Johnson**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 17:51:30
Time Test Ended: 23:35:45
Interval: **4461.00 ft (KB) To 4514.00 ft (KB) (TVD)**
Total Depth: **4514.00 ft (KB) (TVD)**
Hole Diameter: **7.88 inches** Hole Condition: **Good**
Test Type: **Conventional Bottom Hole (Reset)**
Tester: **Bradley Walter**
Unit No: **53**
Reference Elevations: **2847.00 ft (KB)**
2837.00 ft (CF)
KB to GR/CF: **10.00 ft**

Serial #: **8522** Outside
Press@RunDepth: **129.63 psig @ 4462.00 ft (KB)** Capacity: **8000.00 psig**
Start Date: **2012.11.18** End Date: **2012.11.18** Last Calib.: **2012.11.18**
Start Time: **15:47:05** End Time: **23:35:44** Time On Btm: **2012.11.18 @ 17:51:15**
Time Off Btm: **2012.11.18 @ 20:52:15**

TEST COMMENT: IF: BOB @ 20 min.
IS: No return.
FF: BOB @ 16 min.
FSI: 2" return blow.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2179.44	115.84	Initial Hydro-static
1	30.02	115.02	Open To Flow (1)
30	87.19	121.65	Shut-In(1)
77	1120.69	123.61	End Shut-In(1)
78	96.63	123.03	Open To Flow (2)
121	129.63	125.78	Shut-In(2)
181	1106.47	127.18	End Shut-In(2)
181	2143.71	127.60	Final Hydro-static

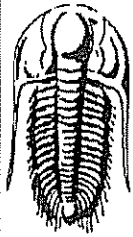
Recovery

Length (ft)	Description	Volume (bbl)
170.00	gmco 30g 20m 50o	0.84
90.00	gmco 10g 40m 50o	0.60
0.00	400' GIP	0.00

Gas Rates

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

* Recovery from multiple tests



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil & Gas
301 S Market St
Wichita KS 67202
ATTN: Brad Rine

23 14s 31w Gove, Ks
Coldwater-Hanna 1-23
Job Ticket: 49772 DST#: 4
Test Start: 2012.11.18 @ 15:47:00

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil APt: 27 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: 0 ppm
Viscosity: 55.00 sec/qt	Cushion Volume: bbl	
Water Loss: 6.40 in ³	Gas Cushion Type:	
Resistivity: ohm.m	Gas Cushion Pressure: psig	
Salinity: 2500.00 ppm		
Filter Cake: 1.00 inches		

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
170.00	gmco 30g 20m 50o	0.836
90.00	gmco 10g 40m 50o	0.597
0.00	400' GIP	0.000

Total Length: 260.00 ft Total Volume: 1.433 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

