



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1114703  
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: \_\_\_\_\_



1114703

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](mailto: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
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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
<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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Lario Oil & Gas Company
Well Name	McDaniel 1-4
Doc ID	1114703

Tops

Name	Top	Datum
Heebner	3743	-902
Lansing	3790	-949
Stark Shale	4041	-1200
Hushpuckney	4087	-1246
Base KC	4145	-1304
Mamaton	4182	-1341
Pawnee	4255	-1414
Ft. Scott	4287	-1446
Johnson	4379	-1538
Morrow	4432	-1591
Basal Penn	4450	-1609
Mississippian	4477	-1636

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

March 06, 2013

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

Re: ACO1  
API 15-109-21159-00-00  
McDaniel 1-4  
NE/4 Sec.04-15S-33W  
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



# INVOICE

PO Box 93999  
Southlake, TX 76092

Invoice Number: 134893  
Invoice Date: Feb 14, 2013  
Page: 1

Voice: (817) 546-7282  
Fax: (817) 246-3361

<b>Bill To:</b>
Lario Oil & Gas Co. Lario Oil & Gas Co. P.O. Box 1093 Garden City, KS 67846

*McDaniel #1-4  
Drilling  
AFE-13-014  
CK 2/25/13*

Now Includes:



Customer ID	Field Ticket #	Payment Terms	
Lario	60116	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Oakley	Feb 14, 2013	3/16/13

Quantity	Item	Description	Unit Price	Amount
		McDaniel #1-4		
123.00	MAT	Class A Common	17.90	2,201.70
82.00	MAT	Pozmix	9.35	766.70
7.00	MAT	Gel	23.40	163.80
51.00	MAT	Flo Seal	2.97	151.47
220.16	SER	Cubic Feet	2.48	545.99
229.75	SER	Ton Mileage	2.60	597.35
1.00	SER	Plug to Abandon	2,483.59	2,483.59
25.00	SER	Pump Truck Mileage	7.70	192.50
25.00	SER	Light Vehicle Mileage	4.40	110.00
1.00	EQP	8.5/8 Dry Hole Plug	107.64	107.64
1.00	CEMENTER	Andrew Forslund		
1.00	EQUIP OPER	Dane Retzloff		
1.00	OPER ASSIST	David Scariano		

*XC*  
*[Signature]*  
*XC*

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 2,123.01

ONLY IF PAID ON OR BEFORE

Mar 11, 2013

Subtotal	7,320.74
Sales Tax	571.02
Total Invoice Amount	7,891.76
Payment/Credit Applied	
<b>TOTAL</b>	<b>7,891.76</b>

# ALLIED OIL & GAS SERVICES, LLC 060116

Federal Tax I.D. # 20-8651475

EMIT TO P.O. BOX 93999  
SOUTHLAKE, TEXAS 76092

SERVICE POINT:

Oakley

DATE <u>2-14-13</u>	SEC. <u>4</u>	TWP. <u>15</u>	RANGE <u>23</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00</u>	JOB FINISH <u>2:00 PM</u>
WELL # <u>7021112L</u>	WELL # <u>1-4</u>	LOCATION <u>Oakley 235 #12W 25 3/4W</u>			COUNTY <u>Zogah</u>	STATE <u>KS</u>	
LD OR NEW (Circle one)		LOCATION <u>1/2N 1 1/2E into</u>					

CONTRACTOR South Wind 70  
 TYPE OF JOB PTA  
 OIL SIZE 2 1/2 T.D. 4848'  
 CASING SIZE DEPTH  
 JOBSING SIZE DEPTH  
 RILL PIPE 4 1/2 DEPTH 2130'  
 JOL DEPTH  
 RES. MAX MINIMUM  
 EAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG.  
 IRFS.  
 SPLACEMENT

OWNER same  
 CEMENT  
 AMOUNT ORDERED 205 sks 60/40 499.6  
1/4 Flu-seal  
 COMMON 123 sks @ 17.90 2201.70  
 POZMIX 82 sks @ 9.35 766.70  
 GEL 7 sks @ 23.40 163.80  
 CHLORIDE @  
 ASC @  
Flu-seal 514 @ 2.97 151.47  
 HANDLING 220.16 cu/ft @ 2.48 545.99  
 MILEAGE 2.60 700/mile 9.19 20 597.35  
 TOTAL 4427.01

EQUIPMENT  
 IMP TRUCK CEMENTER Andrew 1  
431 HELPER Dane 2  
 JLK TRUCK  
404 DRIVER David S 3  
 JLK TRUCK  
 DRIVER

REMARKS:  
5 sks @ 2130'  
2 sks @ 1027'  
2 sks @ 319'  
2 sks @ 40'  
2 sks Rat hole

ORDER TO: Lario Oil & Gas  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE  
 DEPTH OF JOB 2130'  
 PUMP TRUCK CHARGE 2483.59  
 EXTRA FOOTAGE @  
 MILEAGE 25 miles @ 2.20 192.50  
 MANIFOLD @  
Light vehicle @ 4.40 110.00  
 TOTAL 2786.09

I, Allied Oil & Gas Services, LLC,  
 you are hereby requested to rent cementing equipment  
 I furnish (center and helper(s) to assist owner or  
 contractor to do work as is listed. The above work was  
 done to satisfaction and supervision of owner agent or  
 contractor. I have read and understand the "GENERAL  
 TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT  
858  
1 day hole plug @ 107.64  
 TOTAL 107.64

PRINTED NAME Sam S. [Signature]  
 NATURE [Signature]

SALES TAX (if Any) 571.01  
 TOTAL CHARGES 7,320.74  
 DISCOUNT 2123.01 IF PAID IN 30 DAYS  
 Net 5197.73

7.8 all

1.05

229.75

[Signature]



# INVOICE

PO Box 93999  
Southlake, TX 76092

Invoice Number: 134800  
Invoice Date: Feb 7, 2013  
Page: 1

Voice: (817) 546-7282  
Fax: (817) 246-3361

Now Includes:

<b>Bill To:</b>
Lario Oil & Gas Co. Lario Oil & Gas Co. P.O. Box 1093 Garden City, KS 67846

drilling AFE 13-014  
2-28-13 LK



Customer ID	Field Ticket #	Payment Terms	
Lario	60053	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Oakley	Feb 7, 2013	3/9/13

Quantity	Item	Description	Unit Price	Amount
		<u>McDaniel #1-4</u>		
170.00	MAT	Class A Common	17.90	3,043.00
3.00	MAT	Gel	23.40	70.20
6.00	MAT	Chloride	64.00	384.00
183.84	SER	Cubic Feet	2.48	455.92
209.75	SER	Ton Mileage	2.60	545.35
1.00	SER	Surface	1,512.25	1,512.25
25.00	SER	Pump Truck Mileage	7.70	192.50
25.00	SER	Light Vehicle Mileage	4.40	110.00
1.00	SER	Manifold Head Rental – No Cahrge		
1.00	EQP	8.5/8 Wooden Plug	107.64	107.64
1.00	CEMENTER	LaRene Wentz		
1.00	OPER ASSIST	Paul Beaver		
1.00	OPER ASSIST	David Scariano		

*al*  
*lc*  
*[Signature]*

Subtotal	6,420.86
Sales Tax	281.18
Total Invoice Amount	6,702.04
Payment/Credit Applied	
<b>TOTAL</b>	<b>6,702.04</b>

ALL PRICES ARE NET, PAYABLE  
30 DAYS FOLLOWING DATE OF  
INVOICE. 1 1/2% CHARGED  
THEREAFTER. IF ACCOUNT IS  
CURRENT, TAKE DISCOUNT OF

\$ 1,797.84

ONLY IF PAID ON OR BEFORE

Mar 4, 2013

# ALLIED OIL & GAS SERVICES, LLC 060053

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999  
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Dakley

DATE <u>2-2-13</u>	SEC. <u>14</u>	TWP. <u>15</u>	RANGE <u>33</u>	CALLED OUT	ON LOCATION <u>2:00pm</u>	JOB START <u>3:00p</u>	JOB FINISH <u>5:00pm</u>
LEASE <u>McDaniel</u>	WELL # <u>1-4</u>	LOCATION <u>Dakley, 235, 41/2 W, 25,</u>			COUNTY <u>Logan</u>	STATE <u>OK</u>	
OLD OR NEW (circle one)		<u>31/4 W, 1 1/2 N, 1 1/2 E int</u>			<u>1.01</u>	<u>1.8</u>	

CONTRACTOR Southwind 70 OWNER same

TYPE OF JOB Surface

HOLE SIZE 12 1/4" T.D. 270' CEMENT AMOUNT ORDERED 170 sacks cement

CASINO SIZE 7 1/8" DEPTH 269' 2 1/2 bags

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT'

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 6.26661

EQUIPMENT

PUMP TRUCK CEMENTER Lakens Brantley

# 431 HELPER Paul Beaver 3

BULK TRUCK

# 347 DRIVER David Scarsiano 3

BULK TRUCK

# DRIVER

COMMON 1205/ks @ 17.90 3043.00

POZMIX @

OBL 35ks @ 22.40 70.20

CHLORIDE 65ks @ 64.00 384.00

ASC @

HANDLING 18584 PFS @ 2.48 455.92

MILEAGE 2.8764x 2.8 unit @ 26.0 545.35

TOTAL 4498.47

209.75

REMARKS:

Mix 170 sacks cement  
Displace with water

Cement did OK on site.

Thank you

CHARGE TO: Harco Oil & Gas Co

STREET

CITY STATE ZIP

TOTAL 1814.75

PLUG & FLOAT EQUIPMENT

wooden plug @ 107.64

@

@

@

TOTAL 107.64

To: Allied Oil & Gas Services, LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME S. A. STEIN

SIGNATURE [Signature]

SALES TAX (if Any) 281.17

TOTAL CHARGES 6,420.86

DISCOUNT 1797.84 IF PAID IN 30 DAYS

4623.02





**TRILOBITE  
TESTING, INC.**

## DRILL STEM TEST REPORT

Lario Oil & Gas Co.

4 15s 33w

301 S. Market St.  
Wichita, Ks 67202

**McDaniel 1-4**

Job Ticket: 51435

DST#: 1

ATTN: Bob Bayer

Test Start: 2013.02.12 @ 11:52:00

### GENERAL INFORMATION:

Formation: **Marmaton**

Deviated: **No Whipstock:** ft (KB)

Time Tool Opened: 14:22:15

Time Test Ended: 19:40:15

Test Type: **Conventional Bottom Hole (Initial)**

Tester: **Bradley Waiter**

Unit No: **53**

Interval: **4166.00 ft (KB) To 4250.00 ft (KB) (TVD)**

Total Depth: **4250.00 ft (KB) (TVD)**

Hole Diameter: **7.88 inches** Hole Condition: **Good**

Reference Elevations: **2839.00 ft (KB)**

**2827.00 ft (CF)**

KB to GR/CF: **12.00 ft**

**Serial #: 8522**

**Outside**

Press@RunDepth: **47.38 psig @ 4167.00 ft (KB)**

Capacity: **8000.00 psig**

Start Date: **2013.02.12**

End Date:

**2013.02.12**

Last Calib.: **2013.02.12**

Start Time: **11:52:05**

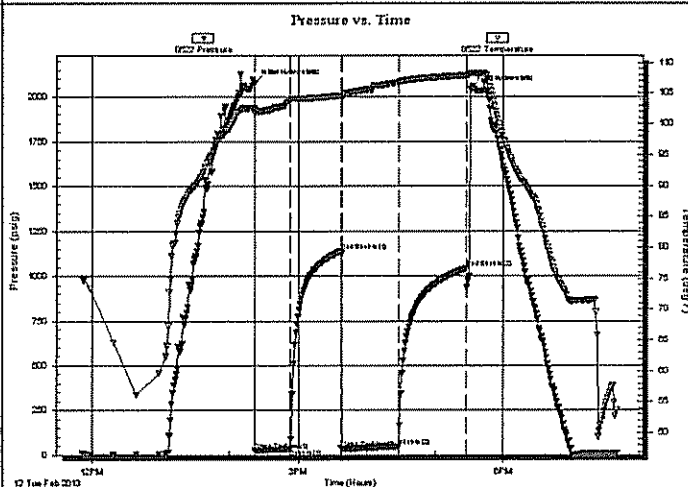
End Time:

**19:40:14**

Time On Btm: **2013.02.12 @ 14:22:00**

Time Off Btm: **2013.02.12 @ 17:30:45**

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



### PRESSURE SUMMARY

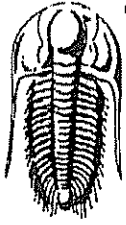
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2078.82	102.54	Initial Hydro-static
1	23.61	101.54	Open To Flow (1)
32	34.52	103.95	Shut-In(1)
76	1136.12	104.62	End Shut-In(1)
76	35.58	104.30	Open To Flow (2)
126	47.38	106.80	Shut-In(2)
186	1042.43	107.92	End Shut-In(2)
189	2043.66	108.29	Final Hydro-static

### Recovery

Length (ft)	Description	Volume (bbl)
50.00	mud 100m (oil Spots in tool)	0.50

### Gas Rates

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



**TRILOBITE  
TESTING, INC**

**DRILL STEM TEST REPORT**

**FLUID SUMMARY**

Lario Oil & Gas Co.

**4 15s 33w**

301 S. Market St.  
Wichita, Ks 67202

**McDaniel 1-4**

Job Ticket: 51435

DST#: 1

ATTN: Bob Bayer

Test Start: 2013.02.12 @ 11:52:00

**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: 49.00 sec/qt

Cushion Volume:

bbl

Water Loss: 8.79 in<sup>2</sup>

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 1.00 inches

**Recovery Information**

Recovery Table

Length ft	Description	Volume bbl
50.00	mud 100m (oil Spots in tool)	0.497

Total Length: 50.00 ft      Total Volume: 0.497 bbl

Num Fluid Samples: 0

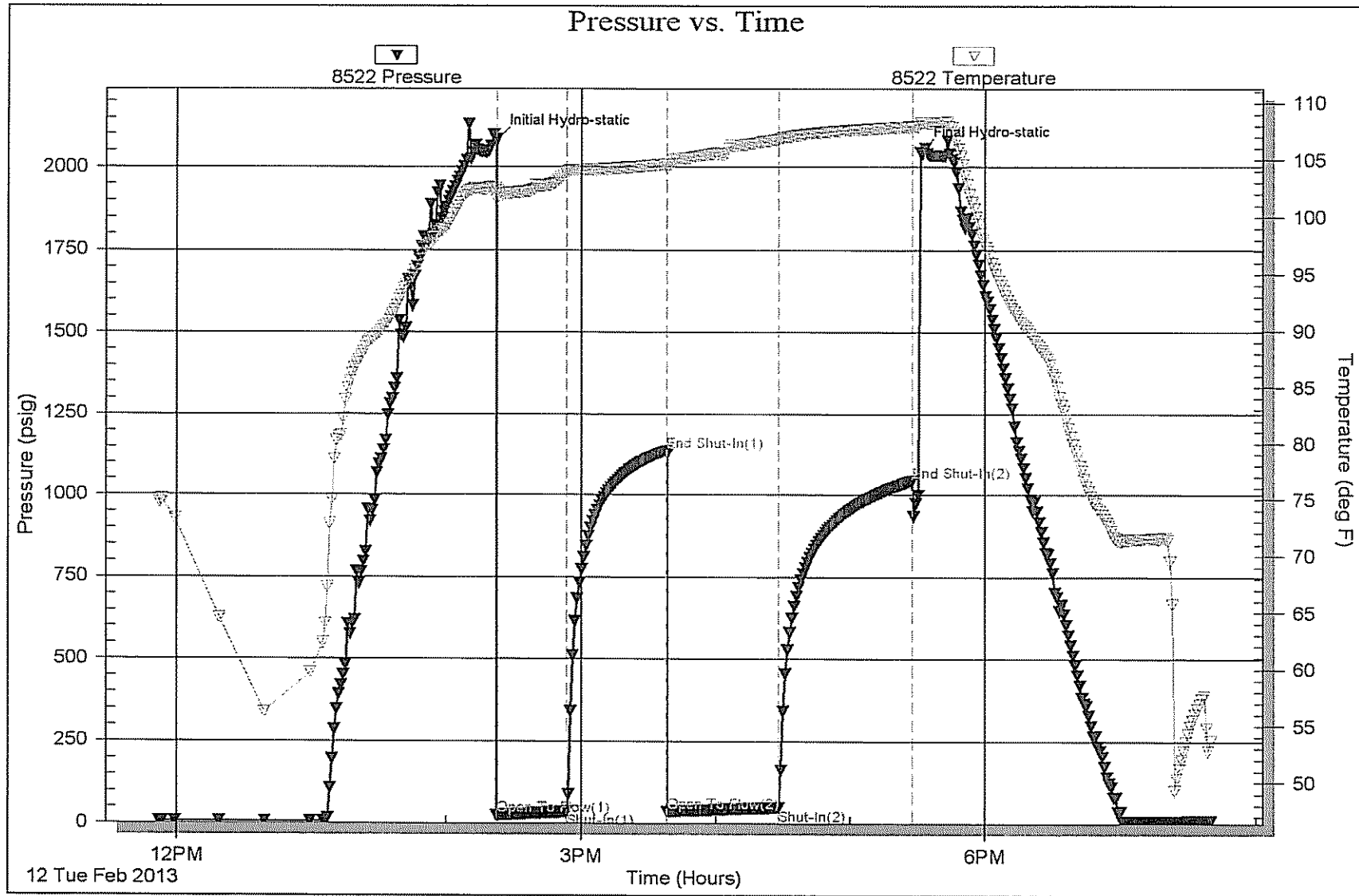
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





**TRILOBITE  
TESTING, INC.**

## DRILL STEM TEST REPORT

Lario Oil & Gas Co.

4 15s 33w

301 S. Market St.  
Wichita, Ks 67202

McDaniel 1-4

Job Ticket: 51436

DST#: 2

ATTN: Bob Bayer

Test Start: 2013.02.13 @ 06:08:00

### GENERAL INFORMATION:

Formation: Pawnee - Ft. Scott

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 08:14:15

Time Test Ended: 12:19:30

Test Type: Conventional Bottom Hole (Reset)

Tester: Bradley Walter

Unit No: 53

Interval: 4248.00 ft (KB) To 4304.00 ft (KB) (TVD)

Total Depth: 4304.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Good

Reference Elevations: 2839.00 ft (KB)

2827.00 ft (CF)

KB to GR/CF: 12.00 ft

Serial #: 8522

Outside

Press@RunDepth: 204.13 psig @ 4249.00 ft (KB)

Start Date: 2013.02.13

End Date:

2013.02.13

Capacity: 8000.00 psig

Last Calib.: 2013.02.13

Start Time: 06:08:05

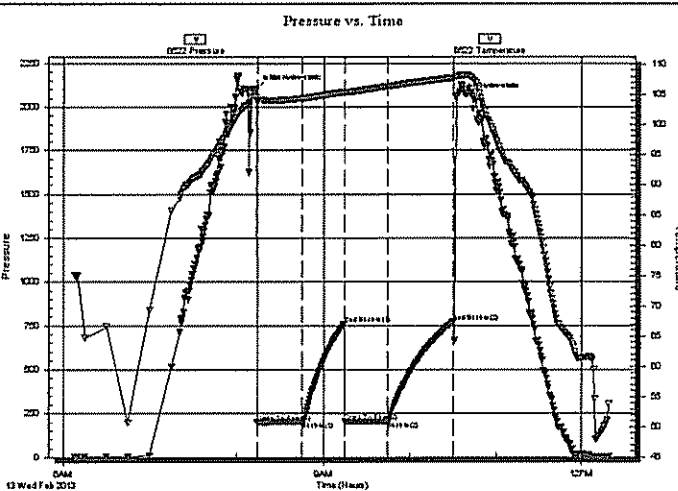
End Time:

12:19:29

Time On Btm: 2013.02.13 @ 08:14:00

Time Off Btm: 2013.02.13 @ 10:32:15

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



### PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2108.23	104.58	Initial Hydro-static
1	199.71	103.77	Open To Flow (1)
32	202.38	104.37	Shut-In(1)
61	759.26	105.40	End Shut-In(1)
61	201.77	105.29	Open To Flow (2)
90	204.13	106.34	Shut-In(2)
137	772.50	107.78	End Shut-In(2)
139	2060.29	108.02	Final Hydro-static

### Recovery

Length (ft)	Description	Volume (bbl)
330.00	mud 100m	3.28

\* 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 Co.

4 15s 33w

301 S. Market St.  
Wichita, Ks 67202

**McDaniel 1-4**

Job Ticket: 51436

DST#: 2

ATTN: Bob Bayer

Test Start: 2013.02.13 @ 06:08:00

**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: 47.00 sec/qt

Cushion Volume:

bbl

Water Loss: 10.39 in<sup>3</sup>

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4400.00 ppm

Filter Cake: 1.00 inches

**Recovery Information**

Recovery Table

Length ft	Description	Volume bbl
330.00	mud 100m	3.283

Total Length: 330.00 ft      Total Volume: 3.283 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

