



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1170474
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: _____

1170474

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> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Lario Oil & Gas Company
Well Name	Jones 6-12
Doc ID	1170474

All Electric Logs Run

CNL/CDL
DIL
MEL
BHCS

Form	ACO1 - Well Completion
Operator	Lario Oil & Gas Company
Well Name	Jones 6-12
Doc ID	1170474

Tops

Name	Top	Datum
Heebner	2638	-1238
Lansing	2926	-1526
Stark Shale	3311	-1911
Hushpuckney	3335	-1935
Base KC	3379	-1979
Marmaton	3456	-2056
Pawnee	3517	-2117
Mississippian	3750	-2350



PAGE	CUST NO	INVOICE DATE
1 of 1	1002301	12/05/2013
INVOICE NUMBER		
1718 - 91354172		

Pratt (620) 672-1201
 B LARIO OIL & GAS
 I P O BOX 84
 L MURDOCK
 L KS US 67111
 T
 O ATTN: ACCOUNTS PAYABLE

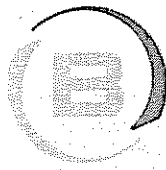
J LEASE NAME Jones 6-12
 O LOCATION (AFE# 13378)
 B COUNTY Kingman
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40662853	19843		Net - 30 days	01/04/2014

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 12/03/2013 to 12/03/2013</i>				
0040668853				
171809558A Cement-New Well Casing/Pi 12/03/2013 Cement 5 1/2" Longstring				
AA2 Cement	160.00	EA	11.39	1,822.40 T
60/40 POZ	50.00	EA	8.04	402.00 T
Salt	869.00	EA	0.32	291.11 T
Celloflake	40.00	EA	2.48	99.16 T
C-41P	31.00	EA	2.68	83.08 T
FLA-322	76.00	EA	5.03	381.90 T
C-44	151.00	EA	3.45	521.03 T
Claymax KCL Substitute	5.00	EA	23.45	117.25 T
Super Flush	500.00	EA	1.64	820.75 T
"Guide Shoe - Regular. 5 1/2" (Blue)"	1.00	EA	167.50	167.50
"Top Rubber Crnt Plug, 5 1/2" "	1.00	EA	70.35	70.35
Flapper Type Insert Float Valves, 5 1/2"	1.00	EA	144.05	144.05
"Turbolizer, 5 1/2" (Blue)"	6.00	EA	73.70	442.20
Heavy Equipment Mileage	120.00	MI	4.69	562.80
Blending & Mixing Service Charge	210.00	BAG	0.94	196.98
"Proppant & Bulk Del. Chgs., per ton mil	582.00	EA	1.07	623.90
Depth Charge; 4001'-5000'	1.00	EA	1,688.40	1,688.40
Plug Container Util. Chg.	1.00	EA	167.50	167.50
"Service Supervisor, first 8 hrs on loc.	1.00	EA	117.25	117.25
"Unit Mileage Chg (PU, cars one way)"	60.00	MI	2.85	170.85

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	8,890.46
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	313.17
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	9,203.63
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

BS
12-9-13



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 09558 A

DATE _____ TICKET NO. _____

DATE OF JOB 12-3-13 DISTRICT Pratt		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:							
CUSTOMER LAINO OIL + GAS		LEASE JON-3		WELL NO 6-12					
ADDRESS 1		COUNTY KINGMAN		STATE KS					
CITY STATE		SERVICE CREW MATTAI, MARQUEZ, KENNIA							
AUTHORIZED BY		JOB TYPE: COW L.S.							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
37580	.5						12-2-13	AM	11:15
						ARRIVED AT JOB	12-3-13	AM	7:30
						START OPERATION		AM	10:20
19889/19443	.5					FINISH OPERATION		AM	10:55
						RELEASED		AM	11:45
19826/73768	.5					MILES FROM STATION TO WELL			60

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

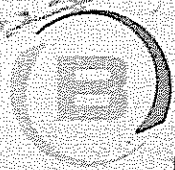
SIGNED: *[Signature]*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	S AMOUNT	
CP 105	AA-2 (20)	SK	160		2,720.00	
CP 105	60/40 PDR	SK	50		600.00	
CC 111	SAITH	LB	867		434.50	
CC 102	CELLULOSE	LB	40		148.00	
CC 105	C-41P	LB	31		124.00	
CC 129	FIA-322	LB	76		570.00	
CA 251	Guide Sizer Key 5/16	EA	1		250.00	
CA 103	TOP RUBBER PING 5/16	EA	1		105.00	
CA 1951	ELAP-2 TYPE INSERT 5/16	EA	1		215.00	
CA 1651	Insulator 5/16	EA	6		660.00	
S 003	Serv. 5/16-1/2	EA	1		175.00	
C 704	CLAYMAY KCI 348	SAI	5		175.00	
CC 154	Sizer Bush	SAI	500		1,225.00	
E 100	C.U. M.100	MA	60		295.00	
E 101	Heavy eq. M.100	ME	120		840.00	
E 113	PROP + BULK DOL.	TR	582		931.20	
CE 205	DRPTS CHANGE 4001-5000	4AN	1		2,520.00	
CE 240	Blend + MIX CHANGE	SK	210		294.00	
CE 504	PING CAT UTILIZATION	EA	1		250.00	
CE 115	C-414	10	151		177.60	
					777.60 SUB TOTAL	8,890.46
CHEMICAL / ACID DATA:		SERVICE & EQUIPMENT		%TAX ON \$		
		MATERIALS		%TAX ON \$		
					TOTAL	

SERVICE REPRESENTATIVE Mike MATTAI

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 09558 A

DATE _____ TICKET NO. _____

DATE OF JOB		DISTRICT		NEW WELL <input type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:						
CUSTOMER		LEASE		WELL NO.						
ADDRESS		COUNTY		STATE						
CITY		STATE		SERVICE CREW						
AUTHORIZED BY		JOB TYPE:								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
						ARRIVED AT JOB				
						START OPERATION				
						FINISH OPERATION				
						RELEASED				
						MILES FROM STATION TO WELL				

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

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SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CE 1	...	EA	10	2720	27200
CE 2	...	EA	10	600	6000
CE 3	...	EA	10	434	4340
CE 4	...	EA	10	145	1450
CE 5	...	EA	10	124	1240
CE 6	...	EA	10	570	5700
CE 7	...	EA	10	250	2500
CE 8	...	EA	10	105	1050
CE 9	...	EA	10	215	2150
CE 10	...	EA	10	660	6600
CE 11	...	EA	10	170	1700
CE 12	...	EA	10	170	1700
CE 13	...	EA	10	1200	12000
CE 14	...	EA	10	245	2450
CE 15	...	EA	10	840	8400
CE 16	...	EA	10	931	9310
CE 17	...	EA	10	2520	25200
CE 18	...	EA	10	294	2940
CE 19	...	EA	10	250	2500

7770 SUB TOTAL 68700

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
------------------------	---

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



PAGE 1 of 1	CUST NO 1002301	INVOICE DATE 12/02/2013
INVOICE NUMBER 1718 - 91351169		

Pratt (620) 672-1201
 B LARIO OIL & GAS
 I P O BOX 84
 L MURDOCK
 L KS US 67111
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Jones 6-12
 O LOCATION AFE#13378
 B COUNTY Kingman
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40667088	19843		Net - 30 days	01/01/2014

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 11/26/2013 to 11/26/2013</i>				
0040667088				
171809551A Cement-New Well Casing/Pi 11/26/2013				
Cement 8 5/8 Surface				
60/40 POZ	190.00	EA	8.04	1,527.61 T
Celloflake	48.00	EA	2.48	118.99 T
Calcium Chloride	492.00	EA	0.70	346.12 T
"Wooden Cmt Plug, 8 5/8" ""	1.00	EA	107.20	107.20
"Unit Mileage Chg (PU, cars one way)"	60.00	MI	2.85	170.85
Heavy Equipment Mileage	120.00	MI	4.69	562.80
"Proppant & Bulk Del. Chgs., per ton mil	492.00	EA	1.07	527.42
Depth Charge; 0-500'	1.00	EA	670.00	670.00
Plug Container Util. Chg.	1.00	EA	167.50	167.50
Blending & Mixing Service Charge	190.00	BAG	0.94	178.22
"Service Supervisor, first 8 hrs on loc.	1.00	EA	117.25	117.25

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	4,493.96
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	137.50
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	4,631.46
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

BS
R-9-13



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET

1718 09551 A

DATE _____ TICKET NO. _____

DATE OF JOB 11-26-13 DISTRICT Pratt		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:							
CUSTOMER Land Oil + Gas		LEASE Jones WELL NO. 6-12							
ADDRESS		COUNTY Kingman STATE KS							
CITY STATE		SERVICE CREW MATTAI, Graves, Pierson							
AUTHORIZED BY		JOB TYPE: CW SP							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE 11-25-13	AM/PM	TIME 9:00
37586	.5					ARRIVED AT JOB	11-26-13	AM/PM	12:05
19889/19843	.5					START OPERATION		AM/PM	4:40
						FINISH OPERATION		AM/PM	5:05
19831/19862	.5					RELEASED		AM/PM	5:45
						MILES FROM STATION TO WELL	60		

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SIGNED: X _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 103	60/40 POZ	SK	190		2,280.00
CC 102	CELLURIAM	LB	48		177.60
CC 109	CALCIUM CHLORIDE	LB	492		516.60
CE 153	WOODEN CMT Plug	EA	1		160.00
E 100	P.U. MILES	ME	60		255.00
E 101	HEAVY EQ. MILES	ME	120		840.00
E 113	PROB + BULK DELIVERY	TR	492		787.20
CE 200	DEPTH CHANGE 0-500'	HR	1		1,000.00
CE 240	BLEND + MIX CHANGE	SK	190		266.00
CE 504	Plug INST. UTILIZATION	JOB	1		250.00
5003	Service Supervisor	HR	1		175.00

SUB TOTAL 4493.96

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE <u>Mike Mattai</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>X</u> _____ (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
---	---

FIELD SERVICE ORDER NO. _____



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET

1718 09551 A

DATE _____ TICKET NO. _____

DATE OF JOB		DISTRICT		NEW WELL <input type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:						
CUSTOMER		LEASE		WELL NO.						
ADDRESS		COUNTY		STATE						
CITY		STATE		SERVICE CREW						
AUTHORIZED BY		JOB TYPE:								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
						ARRIVED AT JOB				
						START OPERATION				
						FINISH OPERATION				
						RELEASED				
						MILES FROM STATION TO WELL				60

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SIGNED: X
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
SP 101	10/4		190		2,280.00
CC 102		10	43		1776.00
CC 103		10	442		51660.00
CC 104			1		160.00
CC 105			6		295.00
CC 106			120		840.00
CC 107			497		787.20
CC 108			1		1,000.00
CC 109			190		266.00
CC 110			1		250.00
CC 111			1		170.00

SUB TOTAL VC 4493.96

CHEMICAL / ACID DATA			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>X</u>
------------------------	--

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

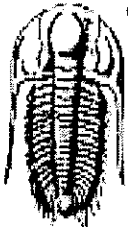
Customer LAW OIL + GAS	Lease No.	Date 11-26-13
Lease JONES	Well # 6-12	
Field Order # 951	Station PRATT	Casing 8 5/8
		Depth 260
Type Job CLIN SR	Formation	County Kingman
		State KS
		Legal Description 12-28-5

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 5/8	Tubing Size	Shots/Ft		Acid EMF	190 SK	60/40 POZ	RATE	PRESS 390
Depth 260	Depth	From	To	Pre Pad				ISIP 1/4 # cr
Volume 16.56	Volume	From	To	Pad				5 Min.
Max Press 304	Max Press	From	To	Frac				10 Min.
Well Connection PC	Annulus Vol.	From	To					15 Min.
Plug Depth 240	Packer Depth	From	To	Flush				HHP Used
								Annulus Pressure
								Gas Volume
								Total Load

Customer Representative **JAY SCHWARTZ** Station Manager **Kevin Guidry** Treater **Mike MATTAI**

Service Units	37580	19880	19848	19831	19862				
Driver Names	MATTAI	STAVES		Pickson					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
12:05	-	-	-	-	ON LOCATION / safety meeting
3:00	-	-	-	-	run 8 5/8 casing
4:25	-	-	-	-	casing on bottom
4:30	200	-	3	-	hook up to casing / break circ w 100
4:40	200	-	3	5	Pump 3 ISBI H2O
4:41	200	-	41	4	Mix 190 SK, 60/40 POZ
4:57	-	-	-	3	Release plug / start displacement
5:05	200	-	15	-	Plug down
					circ thru job 15 bbls to pt
					JOB COMPLETE
					THANK YOU
					MIKE MATTAI



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Lario Oil & Gas Co.

12-28s-5w Kingman Ks.

301 S. Market
Wichita Ks.67202

Jones #6-12

Job Ticket: 51788

DST#: 1

ATTN: Jeff /John Hastings

Test Start: 2013.12.01 @ 13:40:26

GENERAL INFORMATION:

Formation: Miss.

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 15:50:56

Time Test Ended: 22:22:26

Test Type: Conventional Bottom Hole (Initial)

Tester: Gary Pavoteaux

Unit No: 56

Interval: 3777.00 ft (KB) To 3828.00 ft (KB) (TVD)

Total Depth: 3828.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 1400.00 ft (KB)

1390.00 ft (CF)

KB to GR/CF: 10.00 ft

Serial #: 8352 Inside

Press@RunDepth: 143.21 psig @ 3778.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.12.01

End Date:

2013.12.01

Last Calib.: 2013.12.01

Start Time: 13:40:31

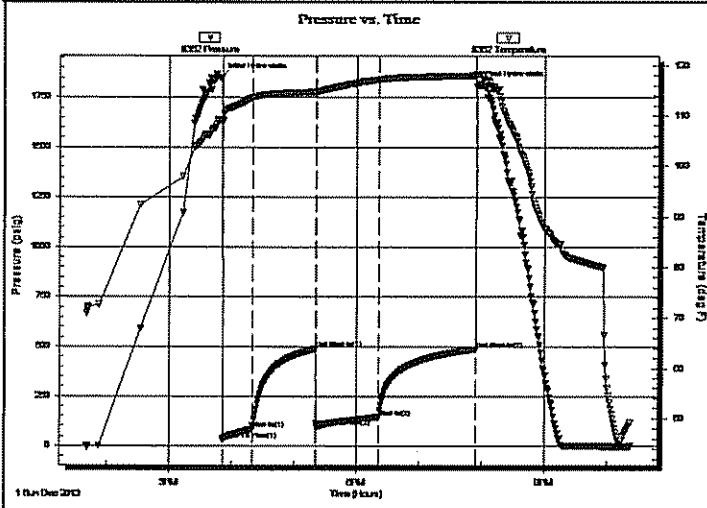
End Time:

22:22:26

Time On Btm: 2013.12.01 @ 15:49:11

Time Off Btm: 2013.12.01 @ 19:56:26

TEST COMMENT: IF:Strong blow . B.O.B. in 75 secs.
IS:No blow .
FF:Strong blow . B.O.B. in 15 secs.GTS in 13 mins.(see gas flow report)
FSI:Weak blow . 1/4 - 1/2".



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1850.82	109.15	Initial Hydro-static
2	32.13	108.74	Open To Flow (1)
31	84.33	113.49	Shut-In(1)
92	488.77	114.69	End Shut-In(1)
93	91.89	114.52	Open To Flow (2)
152	143.21	117.09	Shut-In(2)
246	487.37	117.91	End Shut-In(2)
248	1815.55	118.23	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
100.00	GOCVM 19%g 6%o 19%w 56%m	1.40
120.00	GOCMV 21%g 11%o 23%m 45%w	1.68
0.00	Rw .11 ohms@48 deg	0.00

Gas Rates

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil & Gas Co.

12-28s-5w Kingman Ks.

301 S. Market
Wichita Ks.67202

Jones #6-12

Job Ticket: 51788

DST#: 1

ATTN: Jeff /John Hastings

Test Start: 2013.12.01 @ 13:40:26

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

108000 ppm

Viscosity: 51.00 sec/qt

Cushion Volume:

bbf

Water Loss: 8.99 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 2500.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbf
100.00	GOCWM 19%g 6%o 19%w 56%m	1.403
120.00	GOCMW 21%g 11%o 23%m 45%w	1.683
0.00	Rw .11 ohms@48 deg	0.000

Total Length: 220.00 ft Total Volume: 3.086 bbf

Num Fluid Samples: 0

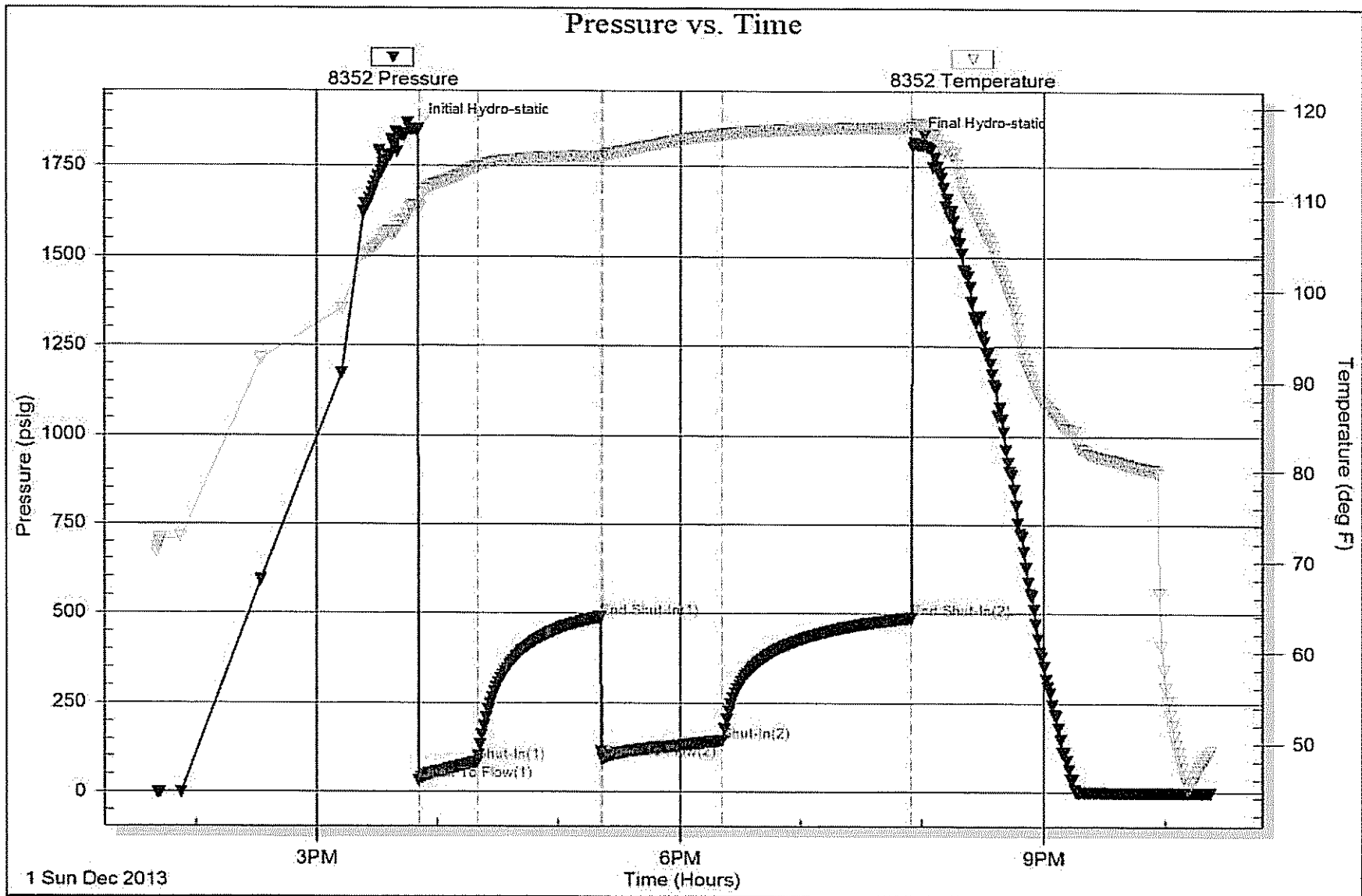
Num Gas Bombs: 1

Serial #: gp-1

Laboratory Name: Caraway

Laboratory Location: Liberal, KS

Recovery Comments:





TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 51788

Well Name & No. JONES # 6-12 Test No. 1 Date 12-1-13
 Company LARIO OIL & GAS CO. Elevation 1400 KB 1390 GL
 Address 301 S. MARKET WICHITA KS 67202
 Co. Rep / Geo. JEFF / JOHN HASTINGS Rig MAVERICK DRUG #106
 Location: Sec. 12 Twp. 28^S Rge. SW Co. KINGMAN State Ks.

Interval Tested 3777 - 3828 Zone Tested Mass
 Anchor Length 51 Drill Pipe Run 3759 Mud Wt. 9.2
 Top Packer Depth 3772 Drill Collars Run 0 Vis 51
 Bottom Packer Depth 3772 Wt. Pipe Run 0 WL 9.0cc
 Total Depth 3828 Chlorides 2500ppm System LCM 5#

Blow Description IF: Strong blow B.O.B. in 75 sec. IST: No blow

FF: Strong blow B.O.B. in 15 sec. GTS in 13 mins. (see gas flow report) FST: Weak blow, 1/4 - 1/2"

Rec	Feet of	%gas	%oil	%water	%mud
<u>100</u>	<u>Go CWM</u>	<u>19</u>	<u>6</u>	<u>19</u>	<u>56</u>
<u>120</u>	<u>Go CMW</u>	<u>21</u>	<u>11</u>	<u>45</u>	<u>23</u>
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 220 @ 1010 BHT 118° Gravity N/A API RW 11 @ 48 °F Chlorides 108,000 ppm

(A) Initial Hydrostatic 1851 Test 1216 T-On Location
 (B) First Initial Flow 32 Jars 1340 T-Started
 (C) First Final Flow 84 Safety Joint 1530 T-Open
 (D) Initial Shut-In 489 Circ Sub 1954 T-Pulled
 (E) Second Initial Flow 92 Hourly Standby 2222 T-Out
 (F) Second Final Flow 143 Mileage 1187 Comments
 (G) Final Shut-In 487 Sampler
 (H) Final Hydrostatic 1816 Straddle Ruined Shale Packer
 Shale Packer Ruined Packer
 Extra Packer Extra Copies
 Extra Recorder
 Day Standby
 Accessibility

Initial Open 30 Sub Total
 Initial Shut-In 60 Total
 Final Flow 60 MP/DST Disc't
 Final Shut-In 90 Sub Total

Approved By _____ Our Representative Cary P... [Signature]

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