



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1210013
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: _____

1210013

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	Zellner 2-33
Doc ID	1210013

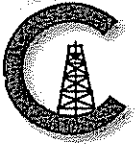
All Electric Logs Run

MAI/MFE
MPD/MDN
MSS
MML
MPD

Form	ACO1 - Well Completion
Operator	Lario Oil & Gas Company
Well Name	Zellner 2-33
Doc ID	1210013

Tops

Name	Top	Datum
Heebner	4020	-813
Lansing	4066	-859
Stark Shale	4353	-1146
Hushpuckney	4404	-1197
Base KC	4480	-1273
Marmaton	4514	-1307
Pawnee	4605	-1398
Ft. Scott	4630	-1423
Johnson	4734	-1527
Morrow	4814	-1607
Basal Penn	4916	-1709
Mississippi	4923	-1716



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 # 268805

Invoice Date: 06/13/2014 Terms: 15/15/30,n/30

Page 1

LARIO OIL & GAS
P.O. BOX 1093
GARDEN CITY KS 67846
(316)265-5611

ZELLNER 2-33
46926
33-17S-35W
06-11-2014
KS

drilling AFE 14

Description	Hours	Unit Price	Total
CEMENT PUMP (SURFACE)	1.00	1150.00	1150.00
EQUIPMENT MILEAGE (ONE WAY)	45.00	5.25	236.25

Part Number	Description	Qty	Unit Price	Total
1102	CALCIUM CHLORIDE (50#)	677.00	.9400	636.38
1104S	CLASS "A" CEMENT (SALE)	240.00	18.5500	4452.00
1118B	PREMIUM GEL / BENTONITE	451.00	.2700	121.77
4432	8 5/8" WOODEN PLUG	1.00	100.7500	100.75

Sublet Performed	Description	Total
9996-130	CEMENT MATERIAL DISCOUNT	-796.64
9995-130	CEMENT EQUIPMENT DISCOUNT	-341.45

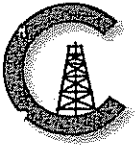
Description	Hours	Unit Price	Total
693 TON MILEAGE DELIVERY	1.00	890.10	890.10

Handwritten signature and initials
JUN 18 2014
Handwritten signature

Amount Due 8020.09 if paid after 07/13/2014

Parts:	5310.90	Freight:	.00	Tax:	367.91	AR	6817.07
Labor:	.00	Misc:	.00	Total:	6817.07		
Sublt:	-1138.09	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
FINV
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 # 268984

Invoice Date: 06/24/2014 Terms: 15/15/30,n/30

Page 1

LARIO OIL & GAS
P.O. BOX 1093
GARDEN CITY KS 67846
(316)265-5611

ZELLNER 2-33

46974
33-17-35
06-22-2014
KS

drilling/longstring
AFG 14127
6-26-14 LR

Description	Hours	Unit Price	Total
SINGLE PUMP	1.00	3175.00	3175.00
EQUIPMENT MILEAGE (ONE WAY)	40.00	5.25	210.00

Part Number	Description	Qty	Unit Price	Total
1126	OIL WELL CEMENT	220.00	23.7000	5214.00
1110A	KOL SEAL (50# BAG)	1100.00	.5600	616.00
1131	60/40 POZ MIX	400.00	15.8600	6344.00
1118B	PREMIUM GEL / BENTONITE	2752.00	.2700	743.04
1107	FLO-SEAL (25#)	100.00	2.9700	297.00
1144G	MUD FLUSH (SALE)	500.00	1.0000	500.00
4159	FLOAT SHOE AFU 5 1/2"	1.00	433.7500	433.75
4454	5 1/2" LATCH DOWN PLUG	1.00	567.0000	567.00
4130	CENTRALIZER 5 1/2"	16.00	61.0000	976.00
4104	CEMENT BASKET 5 1/2"	1.00	290.0000	290.00
4283	DV TOOL W/ LATCH DOWN	1.00	4900.0000	4900.00

Sublet Performed	Description	Total
9996-130	CEMENT MATERIAL DISCOUNT	-3132.12
9995-130	CEMENT EQUIPMENT DISCOUNT	-796.95

Description	Hours	Unit Price	Total
530 TON MILEAGE DELIVERY	1.00	964.00	964.00
693 TON MILEAGE DELIVERY	1.00	964.00	964.00

Amount Due 27895.58 if paid after 07/24/2014

Parts:	20880.79	Freight:	.00	Tax:	1446.52	AR	23711.24
Labor:	.00	Misc:	.00	Total:	23711.24		
Sublt:	-3929.07	Supplies:	.00	Change:	.00		

Signed _____

Date _____



CONSOLIDATED
Oil Well Services, LLC

268984

TICKET NUMBER 46974

LOCATION Oakley K.

FOREMAN Dauen

miles

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
6/22/14	4793	Zellner 2-33	33	17	35	Wichita
CUSTOMER Lario Oil + Gas			modob wto rd 22 3/2 N winto			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY			731	Sory		
STATE			693	Jeff		
ZIP CODE			530	Coody		

JOB TYPE Prod 2-stage HOLE SIZE 7 7/8 HOLE DEPTH 5071 CASING SIZE & WEIGHT 5 1/2, 14"
 CASING DEPTH 5071 DRILL PIPE _____ TUBING _____ OTHER DV Tool 2458"
 SLURRY WEIGHT 14", 12" SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING Shoe Joint 20'
 DISPLACEMENT 123.24, 59.97 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

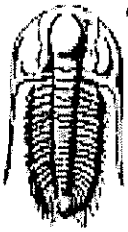
REMARKS: Safety Meeting Rig up on Duke #4 Run Casing + Float Equipment Centralizers -
120" 117" 114" 111" 108" 105" 102" 99" 96" 93" 90" 87" 84" 81" 60" 57" Basket #60
DU Tool # 58 Top of Circulate 1/2 hrs. Pump 5 bbl water mix mud Flush Pump 5 water mix 220
SKS OWC 5" Kolseal washup Pump + Lines Release plug Displace Down with 70 bbl water +
54 1/2 bbl mud Land @ 1500" Lift 800" Drop opening tool open @ 900" Circulate 3 hrs.
Plug Rathole 30 SKS 60/40 8% Gel 1/4" Floseal mix SKS Down Casing Washup Pump
+ Lines Displace Plug Down with 59.97 bbl water Land @ 1400" Lift 600"
Float Did Hold Cement Did Circulate
Approx 50 bbl to Pit

Thanks Dauen + Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401 C	1	PUMP CHARGE	\$ 3175.00	\$ 3175.00
5406	40	MILEAGE	\$ 5.25	\$ 210.00
5407 A	27.54	Ton Mileage Delivery	\$ 1.75	\$ 481.95
1126	220 SKS	OWC	\$ 23.70	\$ 5214.00
1110 A	1100"	Kolseal	\$.56	\$ 616.00
1131	400 SKS	60/40 Raz mix	\$ 15.86	\$ 6344.00
1118 B	2752 #	Bentonite	\$.27	\$ 743.04
1107	100 #	Floseal	\$ 2.97	\$ 297.00
1144 G	500 gal	Mud Flush	\$ 1.00	\$ 500.00
4159	1	AFU Float Shoe (w) 5 1/2	\$ 433.75	\$ 433.75
4454	1	5 1/2 Latch Down Plug Assy. (w)	\$ 567.00	\$ 567.00
4130	16	5 1/2 Centralizers (w)	\$ 61.00	\$ 976.00
4104	1	5 1/2 Basket (w)	\$ 290.00	\$ 290.00
4283	1	5 1/2 DV Tool (w) SR # 2019527	\$ 4900.00	\$ 4900.00
		SubTotal		\$ 26193.75
		Less 15%		\$ 3929.02
		SubTotal		\$ 22264.72
		SALES TAX		1446.50
		ESTIMATED TOTAL		\$ 23711.22

AUTHORIZATION [Signature] TITLE Asst. Foreman 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.



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Lario Oil And Gas Company
301 S Market St
Wichita KS 67202
ATTN: Tim Lauer

33-17s-35w Wichita Co KS

Zellner 2-33

Job Ticket: 57668

DST#: 1

Test Start: 2014.06.17 @ 19:14:23

GENERAL INFORMATION:

Formation: **Lansing L**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 21:14:08

Time Test Ended: 02:33:08

Test Type: Conventional Bottom Hole (Initial)

Tester: Mike Roberts

Unit No: 65

Interval: 4399.00 ft (KB) To 4412.00 ft (KB) (TVD)

Reference Elevations: 3207.00 ft (KB)

Total Depth: 4412.00 ft (KB) (TVD)

3201.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 6.00 ft

Serial #: 8846

Inside

Press@RunDepth: 11.72 psig @ 4407.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.06.17

End Date: 2014.06.18

Last Calib.: 2014.06.18

Start Time: 19:14:23

End Time: 02:33:08

Time On Btm: 2014.06.17 @ 21:13:53

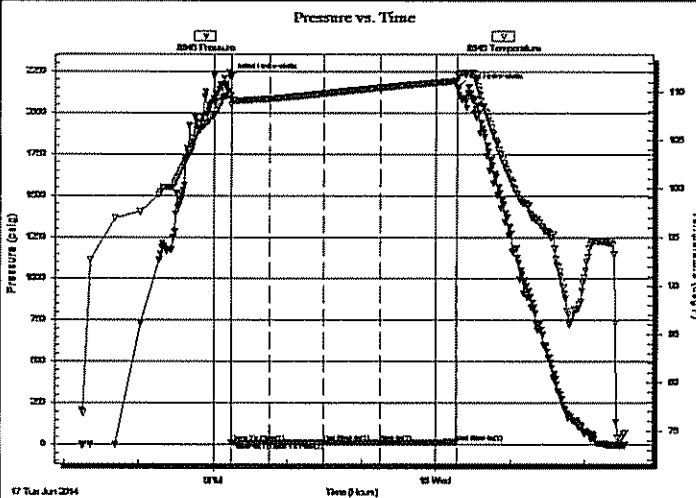
Time Off Btm: 2014.06.18 @ 00:17:08

TEST COMMENT: IF:Weak surface blow died in 2 min.

IS:No return blow

FF:No blow

FS:No return blow



PRESSURE SUMMARY

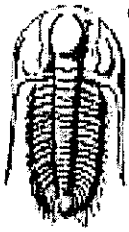
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2212.84	109.63	Initial Hydro-static
1	12.92	108.57	Open To Flow (1)
32	12.37	109.30	Shut-In(1)
76	14.11	109.86	End Shut-In(1)
76	12.33	109.86	Open To Flow (2)
121	11.72	110.46	Shut-In(2)
183	15.76	111.17	End Shut-In(2)
184	2152.38	111.76	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
3.00	mud with oil spots in the tool 100% m	0.04

Gas Rates

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil And Gas Company

33-17s-35w Wichita Co KS

301 S Market St
Wichita KS 67202

Zellner 2-33

Job Ticket: 57668

DST#: 1

ATTN: Tim Lauer

Test Start: 2014.06.17 @ 19:14:23

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:

bbbl

Water Loss: 8.77 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 6000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
3.00	mud with oil spots in the tool 100% _m	0.042

Total Length: 3.00 ft

Total Volume: 0.042 bbl

Num Fluid Samples: 0

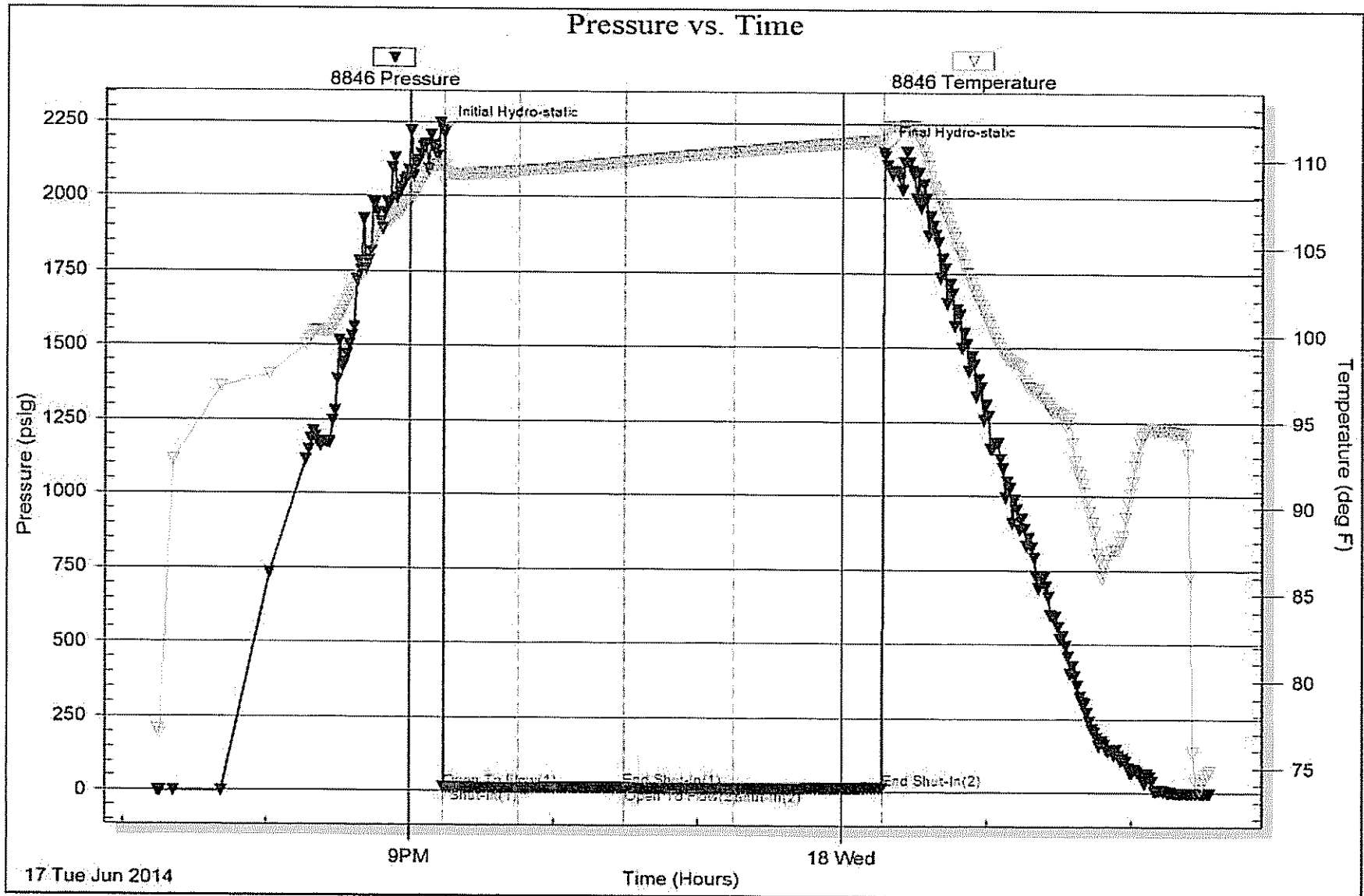
Num Gas Bombs: 0

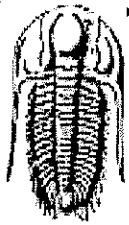
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Lario Oil And Gas Company

33-17s-35w Wichita Co KS

301 S Market St
Wichita KS 67202

Zellner 2-33

Job Ticket: 57669

DST#: 2

ATTN: Tim Lauer

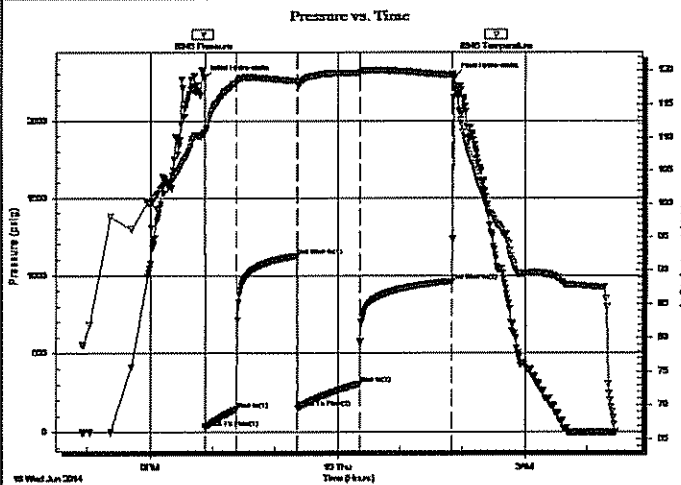
Test Start: 2014.06.18 @ 19:55:15

GENERAL INFORMATION:

Formation: **Marmaton A**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 21:52:15
 Time Test Ended: 04:27:15
 Test Type: Conventional Bottom Hole (Reset)
 Tester: Mike Roberts
 Unit No: 65
 Interval: 4520.00 ft (KB) To 4542.00 ft (KB) (TVD)
 Reference Elevations: 3207.00 ft (KB)
 Total Depth: 4542.00 ft (KB) (TVD)
 3201.00 ft (CF)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 KB to GR/CF: 6.00 ft

Serial #: 8846 Inside
 Press@RunDepth: 305.51 psig @ 4537.00 ft (KB)
 Capacity: 8000.00 psig
 Start Date: 2014.06.18 End Date: 2014.06.19
 Last Calib.: 2014.06.19
 Start Time: 19:55:15 End Time: 04:27:15
 Time On Blm: 2014.06.18 @ 21:51:45
 Time Off Blm: 2014.06.19 @ 01:52:00

TEST COMMENT: IF:BOB in 4 min.
 IS:Built to 6" blow
 FF:BOB in 2 min.
 FS:Built to 4" blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2270.43	110.59	Initial Hydro-static
1	27.91	110.82	Open To Flow (1)
31	143.50	118.11	Shut-in(1)
89	1125.12	118.43	End Shut-in(1)
90	152.23	118.12	Open To Flow (2)
149	305.51	119.63	Shut-in(2)
239	962.46	119.29	End Shut-in(2)
241	2280.82	117.56	Final Hydro-static

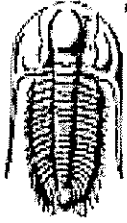
Recovery

Length (ft)	Description	Volume (bbl)
868.00	gco 10%g 90%o	12.18
62.00	gcom 20%g 30%o 50%m	0.87

* Recovery from multiple tests

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (MMcfd)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil And Gas Company

33-17s-35w Wichita Co KS

301 S Market St
Wichita KS 67202

Zellner 2-33

Job Ticket: 57669

DST#: 2

ATTN: Tim Lauer

Test Start: 2014.06.18 @ 19:55:15

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

28 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 57.00 sec/qt

Cushion Volume:

bbl

Water Loss: 9.57 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 2300.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
868.00	gco 10%g 90%o	12.176
62.00	gcom 20%g 30%o 50%m	0.870

Total Length: 930.00 ft Total Volume: 13.046 bbl

Num Fluid Samples: 0

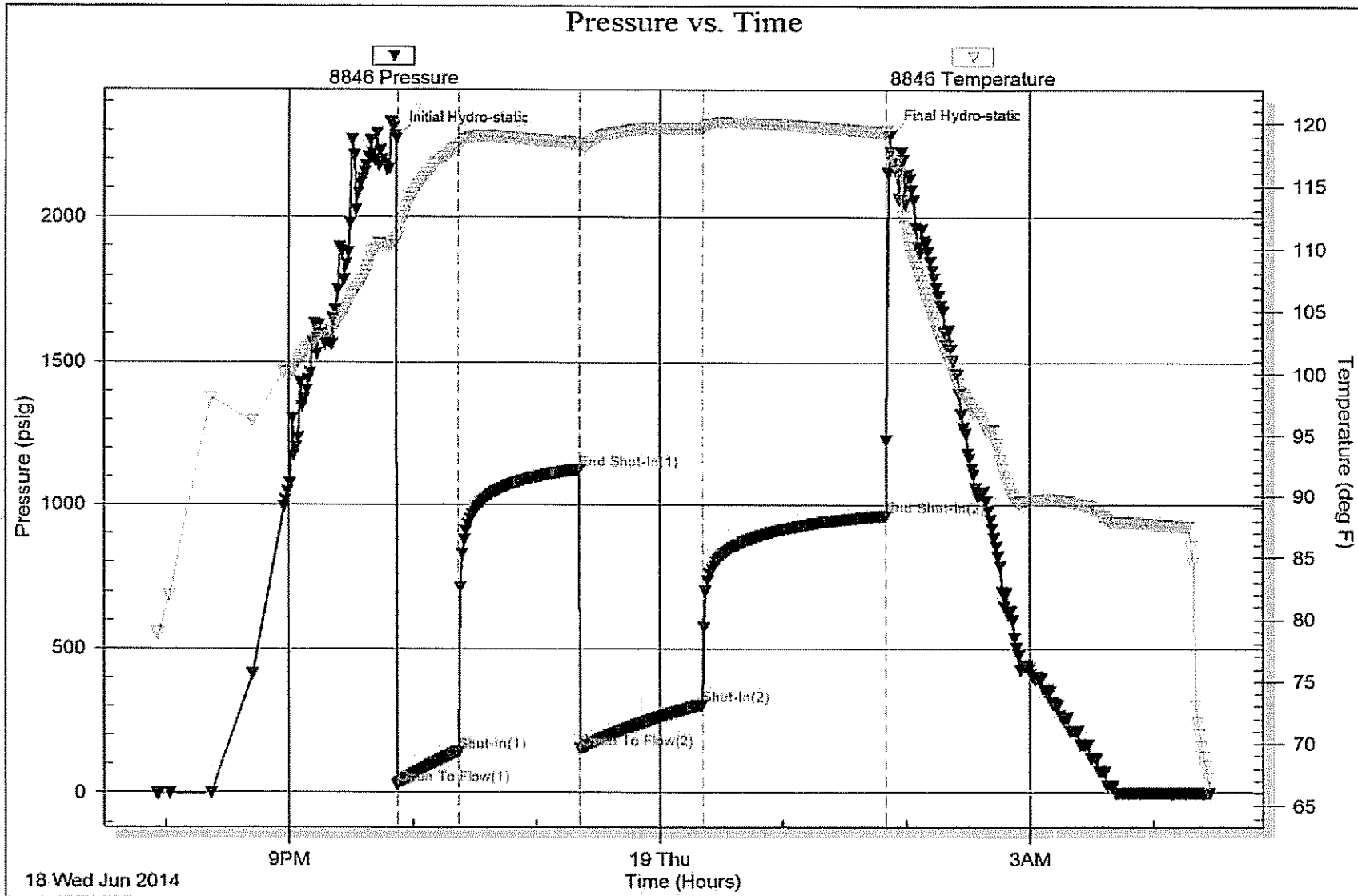
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: API= 26 @ 80 corrected to 28 @ 60





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lario Oil And Gas Company

33-17s-35w Wichita Co KS

301 S Market St
Wichita KS 67202

Zellner 2-33

Job Ticket: 57670

DST#: 3

ATTN: Tim Lauer

Test Start: 2014.06.19 @ 20:53:15

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 10.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 60.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 10.37 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 8000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	mud with oil on top of tool	0.070

Total Length: 5.00 ft

Total Volume: 0.070 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

