KOLAR Document ID: 1673283

Confidentiality Requested:

Yes No

#### Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1
January 2018
Form must be Typed
Form must be Signed
All blanks must be Filled

## WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No.:
Name:	Spot Description:
Address 1:	SecTwpS. R East West
Address 2:	Feet from North / South Line of Section
City:	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxxx) (e.gxxx.xxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used? Yes No
Cathodic Other (Core, Expl., etc.):	
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to: w/ sx cmt.
Original Comp. Date: Original Total Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content:ppm Fluid volume:bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Location of haid disposal in hadica offsite.
GSW Permit #:	Operator Name:
_	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	QuarterSecTwpS. R East West
Recompletion Date Recompletion Date	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 Drill Stem Tests Received
Geologist Report / Mud Logs Received
UIC Distribution
ALT I II Approved by: Date:

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#### Page Two

Operator Name: _				Lease Name:			Well #:	
Sec Twp.	S. R.	Ea	ast West	County:				
	flowing and shu	ıt-in pressures, w	hether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.go\	. Digital electronic log
Drill Stem Tests Ta			Yes No		_	on (Top), Depth ar		Sample
Samples Sent to G	Geological Surv	ey	Yes No	Na	me		Тор	Datum
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No					
		R			New Used	on, etc.		
Purpose of Strir		Hole	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTING / S	QUEEZE RECORD	I		
Purpose:		epth Ty	pe of Cement	# Sacks Used		Type and F	Percent Additives	
Protect Casi								
Plug Off Zon								
<ol> <li>Did you perform a</li> <li>Does the volume o</li> <li>Was the hydraulic</li> </ol>	of the total base f	luid of the hydraulic	fracturing treatment	_	=	No (If No, sk	ip questions 2 an ip question 3) out Page Three (	,
Date of first Producti Injection:	ion/Injection or Re	esumed Production	/ Producing Meth	nod:	Gas Lift 0	Other (Explain)		
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			N INTERVAL: Bottom
	_	on Lease	Open Hole			mmingled mit ACO-4)	Тор	Bottom
,	, Submit ACO-18.)				· · · · · · · · · · · · · · · · · · ·			
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid	Fracture, Shot, Cer (Amount and Kind	menting Squeeze  I of Material Used)	Record
TUBING RECORD:	Size:	Set /	At:	Packer At:				
. 5213 (1200) 10.	JIEG.			. 30.0.71				

Form	ACO1 - Well Completion
Operator	Lario Oil & Gas Company
Well Name	FEIERTAG UNIT 2-4
Doc ID	1673283

### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.625	0	372	Common	240	NA
Production	7.875	5.5	15.5	4866	AA2		10% salt + 1/4# CF+0.8 FLA+0.2 %DF+0.25 % CFR



### HP Oilfield Services, LLC 383 Inverness Parkway, Suite 330 Englewood, CO 80112

## Invoice

Date	Invoice #
7/13/2022	26956

Bill To

Lario Oil & Gas PO Box 1093 Garden City, KS 67846 Lease
-Poir Tag A #8-15

Feiertag Unit #2-4 AFE ZZ-002

APPROVED JUL 1 9 2022

Total

\$4,121.40

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- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				Net 30
	s / Qty	U/M	Rate	Amount
Cement Service for Feir Tag A #8-15 Field Ticket #: 2526 KC Description: Please see Attached Field Ticket				
Pump Charge for Cement  Pumptruck Mileage  Mileage Delivery of Bulk Material - Min  CMT-103  CMT-103  CMT-103	1 45 1	ea ea ea	1,500.00 7.15 660.00	
Class A Cement CMT	100	SKS	20.00	2,000.007
Squeeze Manifold CMT	1	ca	400.00	400,00
Discount - Non-Taxable Items Discount - Taxable Items CMT CMT CMT CMT CS & Scott County Sales Taxes  JUL 25	1 1 122	ea ea	-496.35 -400.00 8.50%	-496.35 -400.007 3,985.40 136.00

785-953-0222

TICKET NUI		2	5	2	Ó	K-(	_
LOCATION	Horas						=
FOREMAN	- #1794	1-7	2.4	Ī	<u>.</u>	1	

# FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER# WE	LLNAME & NUM	ry Omivies	[ ]			
7-13-2	7 12			444.145	TOWNSHIP	RANGE	COUN
CUSTOMER	2 Far	Tag A	4+8-15	15	173	330	Sort
<i>j</i> ,	no Oil +600		Section				
VAILING ADD	### 161 EZ (1 1 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2		South to	TRUCK#	DRIVER	TRUCK#	DRIV
			KQ 90	103	CON D.		
NTY.	STATE	ZIP CODE	360	80080	Jou Son		
	ماراند		4 4""	<del></del>			775
OB TYPE	COLESIZE HOLE SIZE	71/8	GN				
ASING DEPTE	BOIL MAN		_HOLE DEPTH	_ 9 .	CASING SIZE &	WEIGHT	12 4
LURRY WEIGH	DRILL PIPE				·	_OTHER	
SPLACEMEN	· series · 3d	the same of the sa	WATER gallsk		CEMENT LEFT I	n CASING	
enarks:	13 V/2	TIPSI	_MIX PSI		RATE		
		Moeting	R15 1752	Gospuo.1	Burnas	27 120	W a
Tiling.	No Pressure, Bill	LC-JE.	Sat Tex	w kough	Barbaro	D	
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ORIZATION	Manual Clafe AFE#	22-002	· · · · · · · · · · · · · · · · · · ·			SALES TAX ESTIMATED TOTAL	

acknowledge that the payments terms, unless specifically amended in writing on the front of the form or in the customer's account ecords, at our office, and conditions of service on the back of this form are in effect for services identified on this form.