

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED Form ACO-1
September 1999
AUG 12 2004 Form Must Be Typed
KCC WICHITA

Operator: License # 5214
Name: Lario Oil & Gas Company
Address: 301 S. Market Street
City/State/Zip: Wichita, KS 67207
Purchaser: _____
Operator Contact Person: Jay G. Schweikert
Phone: (316) 265-5611
Contractor: Name: Pickrell Drilling Company, Inc.
License: 5123

Wellsite Geologist: _____
Designate Type of Completion:
____ New Well Re-Entry ____ Workover
____ Oil SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: Lario Oil & Gas Co.

Well Name: Clouse #4
Original Comp. Date: 10/08/58 Original Total Depth: 3969
 Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. D-28313

04/28/04 05/02/04 05/28/04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 095-01551-00-01
County: Kingman
____ sw ne se Sec. 13 Twp. 28 S. R. 6 East West
1650 feet from (S) N (circle one) Line of Section
990 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Clouse Well #: 4 RE/SWD
Field Name: Hendrick
Producing Formation: Arbuckle
Elevation: Ground: 1448 Kelly Bushing: 1453
Total Depth: 4560 Plug Back Total Depth: 4521
Amount of Surface Pipe Set and Cemented at 292 existing 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 evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Jay G. Schweikert
Title: Operations Engineer Date: August 10, 2004

Subscribed and sworn to before me this 10th day of August,
2004
Notary Public: Kathy L. Ford
My Appt. Expires 10-22-06
Date Commission Expires: 10-22-06

KCC Office Use ONLY
____ Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Operator Name: Lario Oil & Gas Company Lease Name: Clouse Well #: 4 RE/SWD
 Sec. 13 Twp. 28 S. R. 6 East West County: Kingman

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: GR DIL CNL/CDL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner Shale</td> <td>2791</td> <td>-1338</td> </tr> <tr> <td>Lansing</td> <td>3065</td> <td>-1612</td> </tr> <tr> <td>Marmaton</td> <td>3601</td> <td>-2148</td> </tr> <tr> <td>Mississippian</td> <td>3860</td> <td>-2407</td> </tr> <tr> <td>Arbuckle</td> <td>4381</td> <td>-2928</td> </tr> </table>	Name	Top	Datum	Heebner Shale	2791	-1338	Lansing	3065	-1612	Marmaton	3601	-2148	Mississippian	3860	-2407	Arbuckle	4381	-2928
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CASING RECORD <input checked="" 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
Surface	13-3/4"	10-3/4"	40	292'		300	
Production	9" & 8-3/4"	7"	23	4559'	AA-2	225	10% salt + 1/4# CF + 0.8% FLA

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				

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
2	4284' - 4286'	Acidize w/250 gal 15% MCA	4284
		75 sks Common+2%CC & 75 sks "A" neat	4284
4	4480' - 4520'	Acidize w/3500 gal 15% NEFE	4480

TUBING RECORD	Size 2-3/8"	Set At 4412	Packer At 4412	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 08/06/2004		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.) Other (Specify) _____