

31038

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5214Name: Lario Oil & Gas CompanyAddress: 301 South MarketCity/State/Zip: Wichita, Kansas 67202Purchaser: NoneOperator Contact Person: David MunroPhone: (316) 265-5611Contractor: Name: Duke Drilling Co.License: 5929Wellsite Geologist: Arden Ratzlaff

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: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

☐ 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. _____01-31-01 02-18-01 2-19-01Spud Date or
Recompletion Date Date Reached TD Completion Date
Recompletion DateAPI No. 15 - 033-21189-0000County: Comanche County, KansasNE NE Sec. 16 Twp. 33 S. R. 19 ☐ East ☒ West790 feet from X / (N) (circle one) Line of Section810 feet from (E) / XX (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) (NE) SE NW SWLease Name: Christian Well #: 1-16Field Name: WildcatProducing Formation: NoneElevation: Ground: 1972' Kelly Bushing: 1983'Total Depth: 6150 Plug Back Total Depth: _____Amount of Surface Pipe Set and Cemented at 700' FeetMultiple 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 DWA 2/1/01 AB
(Data must be collected from the Reserve Pit)Chloride content 2000 ppm Fluid volume 600 bblsDewatering method used Remove excess wtr after drilling.Allow pit to dry. Fill in pit.

Location of fluid disposal if hauled offsite: _____

Operator Name: KBW OIL & GAS CO.Lease Name: Harmon License No.: _____Quarter SE Sec. 11 Twp. 33 S. R. 19 ☐ East ☒ WestCounty: Comanche Docket No.: CD-98-329

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: David MunroTitle: Operations Engineer Date: 3-15-01Subscribed and sworn to before me this _____ day of 15th2001Notary Public: Kathy L. FordDate Commission Expires: 10-22-02

KATHY L. FORD
Notary Public - State of Kansas
My Appt. Expires 10-22-02

KCC Office Use ONLY

☒ Letter of Confidentiality Attached☒ If Denied, Yes ☐ Date: _____☒ Wireline Log Received☒ Geologist Report Received☐ UIC Distribution

31038

Side Two

Operator Name: Lario Oil & Gas Company Lease Name: Christian Well #: 1-16
Sec. 16 Twp. 33 S. R. 19 ☐ East ☒ West County: Comanche County, Kansas

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.

<p>Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets)</p> <p>Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy)</p> <p>List All E. Logs Run:</p> <p>DIL, CN-D, SONIC & MICROLOG</p>	<p><input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample</p> <table border="1" style="width:100%"><thead><tr><th>Name</th><th>Top</th><th>Datum</th></tr></thead><tbody><tr><td>HEEBNER SHALE</td><td>4282'</td><td>-2299'</td></tr><tr><td>LANSING</td><td>4466'</td><td>-2483'</td></tr><tr><td>MARMATON</td><td>4980'</td><td>-2997'</td></tr><tr><td>MISSISSIPPI</td><td>5206'</td><td>-3223'</td></tr><tr><td>VIOLA</td><td>6004'</td><td>-4021'</td></tr><tr><td>LTD</td><td>6157'</td><td>-4174'</td></tr></tbody></table> <p style="text-align: center; font-size: 2em; transform: rotate(180deg);">CONFIDENTIAL</p>	Name	Top	Datum	HEEBNER SHALE	4282'	-2299'	LANSING	4466'	-2483'	MARMATON	4980'	-2997'	MISSISSIPPI	5206'	-3223'	VIOLA	6004'	-4021'	LTD	6157'	-4174'
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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.	Casing Depth	Type of Cement	# Sacs Used	Type and Percent Additives
Conductor	17-1/2"	13-3/8"	48#	100'	Class A	125	
Surface	12-1/4"	8-5/8"	25#	700'	65/35 Class A	300	3%cc
						200	3%cc 2%gel

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 (Amount and Kind of Material Used)	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. <u>33</u>		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	
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled				
		<input type="checkbox"/> Other (Specify)			