

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

Operator: License # 5214
Name: Lario Oil & Gas Company
Address: 301 S. Market Street
City/State/Zip: Wichita, KS 67207
Purchaser: Plains Marketing / West Wichita Gas Gathering
Operator Contact Person: Jay G. Schweikert
Phone: (316) 265-5611
Contractor: Name: Duke Drilling Company
License: 5292 5929

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: Beardmore Drilling Co.

Well Name: Wulf #1
Original Comp. Date: 12/19/54 Original Total Depth: 3850
 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. _____

<u>08/09/04</u>	<u>08/11/04</u>	<u>09/24/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 095-01478-00-01
County: Kingman
se ne ne Sec. 10 Twp. 28 S. R. 5 East West
990 feet from S (N) (circle one) Line of Section
330 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: Fearey Well #: 2 RE
Field Name: Broadway
Producing Formation: Mississippian
Elevation: Ground: 1416 Kelly Bushing: 1424
Total Depth: 3969 Plug Back Total Depth: 3926
Amount of Surface Pipe existing Set and Cemented at 160 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set (Port Collar) 275 Feet
If Alternate II completion, cement circulated from 275
feet depth to surface w/ 100 sx cmt.

Drilling Fluid Management Plan ALTIW Has 2-28-07
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume 400 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: November 17, 2004

Subscribed and sworn to before me this 17 th day of November,
2004.

Notary Public: Kathy L. Ford
My Appt. Expires 10-22-06
Date Commission Expires: _____

KCC Office Use ONLY

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

RECEIVED
NOV 18 2004
KCC WICHITA

Operator Name: Lario Oil & Gas Company Lease Name: Fearey Well #: 2 RE
 Sec. 10 Twp. 28 S. R. 5 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>Lansing</td> <td>2971</td> <td>-1547</td> </tr> <tr> <td>Base KC</td> <td>3188</td> <td>-1764</td> </tr> <tr> <td>Stark Shale</td> <td>3345</td> <td>-1921</td> </tr> <tr> <td>Mississippian</td> <td>3784</td> <td>-2360</td> </tr> </table>	Name	Top	Datum	Lansing	2971	-1547	Base KC	3188	-1764	Stark Shale	3345	-1921	Mississippian	3784	-2360
Name	Top	Datum														
Lansing	2971	-1547														
Base KC	3188	-1764														
Stark Shale	3345	-1921														
Mississippian	3784	-2360														

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	12-1/4"	8-5/8"		160		110	
Production	7-7/8"	5-1/2"	15.5#	3965	ASC	200	5# Korseal + 0.5% GasBlk

Purpose: Table 1 Exception 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	275	Class "A"	100	3% CC + 2% Gel
(note initially attempted 50 sks but circulated out)				

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
4	3786' - 3796'	Frac all perms w/ 36,000 gal Delta Foam + 4000# 100 Mesh + 35,000# 12/20 + 4,000# 12/20 RSC	

TUBING RECORD	Size 2-3/8"	Set At 3756	Packer At 3756	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 09/29/04		Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. 1.7	Gas Mcf 75	Water Bbls. 84	Gas-Oil Ratio 44,118
				Gravity 37

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

ALLIED CEMENTING CO., INC.

15343

Federal Tax I.D.# 48-0727860

SHIP TO P.O. BOX 31
RUSSELL, KANSAS 67665

AFC# 04-136

SERVICE POINT:

MEDICINE LODGE

DATE <u>8-11-04</u>	SEC. <u>10</u>	TWP. <u>28s</u>	RANGE <u>05W</u>	CALLED OUT <u>6:00 PM</u>	ON LOCATION <u>11:30 AM</u>	JOB START <u>AM 5:15</u>	JOB FINISH <u>AM</u>
LEASE <u>FEAREY</u>	WELL # <u>2</u>	LOCATION <u>54- Mt. VERNON EXPT</u>	COUNTY <u>KANSAS</u>	STATE <u>KANSAS</u>			
OLD OR (NEW) (Circle one) <u>3s, W/S</u>							

CONTRACTOR DUKE #2
 TYPE OF JOB PRODUCTION CASING
 HOLE SIZE 7.8" T.D. 3964'
 CASING SIZE 5 1/2" X I.S.# DEPTH 3964'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 1450* MINIMUM 100*
 MEAS. LINE SHOE JOINT 23.60'
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT 96 BBLs. 2% KCL WATER

OWNER CARTO OIL & GAS
 CEMENT AMOUNT ORDERED 500 GALLONS MUD CLEAN
25% 60:40:4
200% ASC + 5% KOL-SEAL + .5% GAS BLOCK
 COMMON A 15 @ 7.65 114.75
 POZMIX 10 @ 4.00 40.00
 GEL 1 @ 11.00 11.00
 CHLORIDE @
ASC 200 @ 9.50 1900.00
KOL-SEAL 1000# @ .50 500.00
GAS BLOCK 94# @ 7.00 658.00
MUD CLEAN 500 GAL @ .75 375.00
CLAPD 10 GAL @ 22.90 229.00
 HANDLING 284 @ 1.25 355.00
 MILEAGE 284 x .45 .05 639.00

EQUIPMENT
 PUMP TRUCK CEMENTER KEVIN BRUNHALDT
 # 372 HELPER DAREN FRANKLIN
 BULK TRUCK
 # 356-252 DRIVER JOSH Mc DOWELL
 BULK TRUCK
 # DRIVER

TOTAL 4821.75

REMARKS:
Ran 5 1/2" CASING & BREAK CIRCULATION
PUMP 500 GALS. MUD CLEAN
AUG RAT + MOUSE HOLES 25% 60:40:4
MAX 200% ASC + 5% KOL-SEAL + .5% GAS BLOCK
WASH PUMP & LINES - DISPLACE PING
TO 3941' WITH 96 BBLs 2% KCL
WATER, FLOAT DID HOLD

SERVICE
 DEPTH OF JOB 3964'
 PUMP TRUCK CHARGE 1130.00
 EXTRA FOOTAGE @
 MILEAGE 45 @ 4.00 180.00
 PLUG @
 @
 @

CHARGE TO: CARTO OIL & GAS
 STREET
 CITY WICHITA STATE KANSAS ZIP

TOTAL 1310.00

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

FLOAT EQUIPMENT
5 1/2"
1- SLIP JOINT SHOE @ 200.00 200.00
1- AFU INSERT @ 235.00 235.00
1- PORT COLLAR @ 175.00 175.00
6- CENTRALIZERS @ 50.00 300.00
1- TRP @ 60.00 60.00
 TOTAL 2545.00

SIGNATURE X Brad Sanden

TAX
 TOTAL CHARGE 6022.00
 DISCOUNT 6022.00 - IF PAID IN 30 DAYS

BID

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

PRINTED NAME

RECEIVED
 NOV 18 2004
 KCC WICHITA

ALLIED CEMENTING CO., INC. 17731

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
med. lodge, ks

DATE <u>9-17-04</u>	SEC. <u>10</u>	TWP. <u>28s</u>	RANGE <u>5w</u>	CALLED OUT <u>4:00A.m.</u>	ON LOCATION <u>7:00A.m.</u>	JOB START <u>8:15A.m.</u>	JOB FINISH <u>11:00A.m.</u>
LEASE <u>Fearey</u>		WELL # <u>#2</u>		LOCATION <u>Norwich, 7n-1E-4n-1w</u>		COUNTY <u>Kingman</u>	STATE <u>Ks.</u>
OLD OR <u>NEW</u> (Circle one)				<u>3/4n-w/s</u>			

CONTRACTOR Lieker well service OWNER Lario Oil + Gas

TYPE OF JOB Port Collar

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 x 15.5 DEPTH _____

TUBING SIZE 2 3/8 x 4.70 DEPTH 270'

DRILL PIPE _____ DEPTH _____

TOOL Port Collar DEPTH 270'

PRES. MAX 100 MINIMUM 50

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 3/4 Bbls H₂O

EQUIPMENT

PUMP TRUCK CEMENTER Larry Dreiling

368-265 HELPER Bill McAdoo

BULK TRUCK _____

353 DRIVER Jerry C.

BULK TRUCK _____

364 DRIVER Jerry C.

REMARKS:

Port Collar 270' lead Hole.
Pump 50sx A + 3%cc + 2%Gel.
Cement did not circ. Reverse Cement
Reverse Annulus. wait on cement
Pump 100sx A + 3%cc + 2%Gel. Cement
circ to surface. Close Port Collar
AST up to 1000#. O.K. Run 3 Jts.
Reverse out. Pull Tool / Hole.

*circ
50sx out*

★

★

CHARGE TO: Lario Oil + Gas

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE x Dave Leiker

CEMENT

AMOUNT ORDERED 50sx Class A + 3%cc

2% Gel. 100sx A + 3%cc + 2%Gel

COMMON 150 A @ 7.85 1177.50

POZMIX @ _____

GEL 3 @ 11.00 33.00

CHLORIDE 5 @ 33.00 165.00

ASC @ _____

@ _____

@ _____

RECEIVED

NOV 18 2004

KCC WICHITA

HANDLING 158 @ 1.35 213.30

MILEAGE 45 x 158 x .05 355.50

TOTAL 1944.30

SERVICE

DEPTH OF JOB 270'

PUMP TRUCK CHARGE _____ 700.00

EXTRA FOOTAGE @ _____

MILEAGE 45 @ 4.00 180.00

@ _____

@ _____

@ _____

TOTAL 880.00

PLUG & FLOAT EQUIPMENT

MANIFOLD 1 @ 75.00 75.00

@ _____

@ _____

@ _____

@ _____

TOTAL 75.00

TAX _____

TOTAL CHARGE ~~880.00~~

DISCOUNT ~~100.00~~ IF PAID IN 30 DAYS

x Dave Leiker

ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING

PRINTED NAME