Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL PLUGGING RECORD

K.A.R. 82-3-117

*44' S & 44' W of

Form CP-4
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

Lease Operator: Lario C	Oil & Gas Company	API Number:					
Address: 301 S. Market, Wichita, KS 67202 Phone: (316) 265 - 5611 Operator License #: 5214					API Number: 15 - 5000 27110 Lease Name: #1-5 Well Number: #1-5		
Type of Well: Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) Docket #: (If SWD or ENHR)					1694 Feet from		outh Section Line
The plugging proposal was approved on: 6-18-08 (Date)					616	_	
by: Marvin Mills (KCC District Agent's Name)					5 15 Sec Twp	East / ✓ W	
Is ACO-1 filed? Yes No If not, is well log attached? Yes No					County: Gove		
Producing Formation(s): L	ist All (If needed attach and	other sheet)	_			·	
Depth to Top: Bottom: T.D					Date Well Completed: 6-18-08		
	Bottom: T.D			Plugging Commenced: 6-18-08 Plugging Completed: 6-18-08			
	Depth to Top: Bottom: T.D						
Show depth and thickness	s of all water, oil and nas	formations.					
	Water Records		-	Sasing Record (S	Surface Conductor & Product	rion)	
Formation	Content	From	То	Size	Put In	Pulled Out	
		219'	Surface	8 5/8"	6-9-08		
	-	 					
		1		1			
	-						
Plug hole w/ 25 sx @ 2	plugs were used, state the	e character of 0 sx @ 270';	same depth pla	aced from (botte	placed and the method or i om), to (top) for each plug Fotal of 190 sx 60/40 poz	set.	
				·			
	1,111,000	ulin a	110		33	575	Per CPZI
Name of Plugging Contract	ctor: Allied Cementing	Co., LLC			License #:	9996	Per CPZ/
	oln Street, P. O. Box	x 31, Russe	ell, KS 6766		License #.		· · · · · · · · · · · · · · · · · · ·
Name of Party Responsible for Plugging Fees: Lario Oil & Gas Company					RECEIVED KANSAS CORPORATION COMMISSION		
		Sedgwick	13 Company				
State of Kansas	County,			, SS.		JU	L 0 7 2008
Jay G. Schweikert				_ (Employee of	Operator) or (Operator) on	above-deseribed	exelation of first dwy
sworn on oath, says: That same are true and correct		facts statemer	nts, and matter	s herein contai	ned, and the tog of the abo	ove-described well	WACHATWER'S and the
	•	(Signature)			Jan XI	Musell	ert
		, •	1 S. Market, V	Michita, KS 67	7202	J. V	
		(/ (00/033)	·····	1 ot	July		00.00
KATHY L Notary Public - S My Appt. Expires / 6 ~	SUBSCRIBED and S tate of Kansas	MORN TO be	1000	day ofMy		D-22-10	,

PAT