

ORIGINAL cc Cindy

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

Form ACO-1
September 1999
Form Must Be Typed

10/2/08

Operator: License # 5214
Name: Lario Oil & Gas Company
Address: 301 S. Market
City/State/Zip: Wichita, KS 67202
Purchaser: _____
Operator Contact Person: Jay G. Schweikert
Phone: (316) 265-5611
Contractor: Name: Murfin Drilling Co., Inc.
License: 30606
Wellsite Geologist: Robert P. Bayer II

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: same as above
Well Name: Anderson 14
Original Comp. Date: 2/23/07 Original Total Depth: 4300
____ 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. _____

9-22-08 Spud Date or Recompletion Date
Date Reached TD
9-25-08 Completion Date or Recompletion Date

API No. 15 - 163-23557-0001
County: Rooks
Sec. 18 Twp. 10 S. R. 19 East West
660 4592 feet from S (circle one) Line of Section
1250 1385 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Anderson Well #: 14
Field Name: Marcotte

Producing Formation: Arbuckle (SWD)
Elevation: Ground: 2212 Kelly Bushing: 2217
Total Depth: 4300 Plug Back Total Depth: 4300
Amount of Surface Pipe Set and Cemented at 248 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2211 Feet
If Alternate II completion, cement circulated from surface
feet depth to 2211 w/ 425 sx cmt.

Drilling Fluid Management Plan OWWO- Alt II NR
(Data must be collected from the Reserve Pit) 1-5-09
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____

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: Jay G. Schweikert, Operations Engineer Date: 9-30-08

Subscribed and sworn to before me this 30th day of September, 2008
KATHY L. FORD
Notary Public - State of Kansas
My Appt. Expires 10-22-10
Notary Public: Kathy L Ford
Date Commission Expires: 10-22-10

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
10/6
OCT 02 2008

Operator Name: Lario Oil & Gas Company Lease Name: Anderson Well #: 14
 Sec. ¹⁸ 10 Twp. ¹⁰ 198 S. R. 198 East West County: Rooks

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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-SSD/CNL-MEL	<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</td> <td>3427</td> <td>-1210</td> </tr> <tr> <td>Lansing</td> <td>3464</td> <td>-1247</td> </tr> <tr> <td>Base KC</td> <td>3668</td> <td>-1451</td> </tr> <tr> <td>Conglomerate</td> <td>3694</td> <td>-1477</td> </tr> <tr> <td>Arbuckle</td> <td>3780</td> <td>-1563</td> </tr> </table>	Name	Top	Datum	Heebner	3427	-1210	Lansing	3464	-1247	Base KC	3668	-1451	Conglomerate	3694	-1477	Arbuckle	3780	-1563
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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	12.25"	8-5/8"	23	248	Common	165	2% gel + 3% CC
Production	7.875"	5-1/2"	15.5	3942	AA-2	165	10# salt + 1/4# CF + ***
DV tool				2211	A-Con Blend	425	1/4# CF + 3% CC

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				***Cont. Lead Additives: 0.8% FLA + 0.2% DF + 0.25% CFR

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
	3942'-4300'	12,600 gal 20% FE using jetting tool	

TUBING RECORD		Size Set At	Packer At	Liner Run
3 1/2"		3913'	3913'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method		
08-25-08		<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 <i>(If vented, Submit ACO-18.)</i>	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	

*Ken
10/02/08*