



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 5214
 Name: Lario Oil & Gas Company
 Address 1: 301 S MARKET ST
 Address 2: _____
 City: WICHITA State: KS Zip: 67202 + 3805
 Contact Person: Jay Schweikert
 Phone: (316) 265-5611
 CONTRACTOR: License # 5929
 Name: Duke Drilling Co., Inc.
 Wellsite Geologist: Tim Lauer

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core. Expl., 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 Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

<u>11/23/2012</u>	<u>12/06/2012</u>	<u>12/20/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-203-20194-00-00

Spot Description: _____
E2 SE SE SW Sec. 18 Twp. 19 S. R. 35 East West
330 Feet from North / South Line of Section
2384 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Wichita
 Lease Name: ColburnTucker Well #: 1-18
 Field Name: Wildcat

Producing Formation: Marmaton
 Elevation: Ground: 3193 Kelly Bushing: 3202
 Total Depth: 5250 Plug Back Total Depth: 5093
 Amount of Surface Pipe Set and Cemented at: 350 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: 2368 Feet
 If Alternate II completion, cement circulated from: 2368
 feet depth to: 0 w/ 570 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 19000 ppm Fluid volume: 1000 bbls
 Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite:

Operator Name: _____
 Lease Name: _____ License #: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
 Date: 01/18/2013
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 ALT I II III Approved by: NAOMI JAMES Date: 01/18/2013