

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1071570

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

# WELL COMPLETION FORM

### WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	NE NW SE SW     Icense # County:     Lease Name: Well #:     Lease Name: Well #:     Field Name:        Producing Formation:     Producing Formation:     Elevation:     Gruptetion:     Re-Entry     WSW   SWD   SIOW   D&A   ENHR   SIGW   Temp. Abd.     If yes, show depth set:     Image:     SW     SW     Image:        Image:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Gas D&A ENHR SIGW	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used? Yes No
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)         Chloride content: ppm         privide content: ppm         Pewatering method used:         Location of fluid disposal if hauled offsite:         Operator Name:         Lease Name:         License #:         Quarter       Sec         TwpS. R       East         County:       Permit #:
Spud Date or Recompletion Date         Date Reached TD         Completion Date or Recompletion Date	

### 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:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

	Side Two	
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	

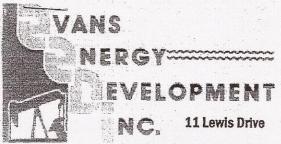
**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional She	eets)	Yes	No		og Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolog	,	Yes	No	Nam	e		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	☐ Yes ☐ Yes ☐ Yes	No No No					
List All E. Logs Run:								
		Report all		RECORD Ne	ew Used	ion etc		
Purpose of String	Size Hole Drilled	Size Ca Set (In C	sing	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

#### ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Shots Per Foot		PERFORATION Specify Fo		RD - Bridge F Each Interval		e			ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Siz	ze:	Set At:		Packer	At:	Liner R	un:	No	
Date of First, Resumed P	roduct	on, SWD or ENH	<b>ર</b> .	Producing N		oing	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
									1	
DISPOSITION	N OF C	BAS:			METHOD	OF COMPLE	TION:		PRODUCTION INTER	RVAL:
Vented Sold		Jsed on Lease		Open Hole	Perf.	Uually (Submit)		Commingled (Submit ACO-4)		
(If vented, Subm	nit ACC	-18.)		Other (Specify	)					



# Oll & Gas Well Drilling Water Wells Geo-Loop Installation

Paola, KS 66071

Phone: 913-557-9083 Fax: 913-557-9084

WELL LOG Pharyn Resources, LLC Longanecker #I-18 API # 15-091-23,440 May 12 - May 18, 2011

	*	
Thickness of Strata	<b>Formation</b>	Total
7	soil & clay	7
7	sandstone	14
4	silty shale	18
64	sandstone	82
1	lime	83
10	shale	93
4	lime	97
15	shale	112
14	lime	126
8	shale	134
10	lime	144
6	shale	150
20	lime	170
19	shale	189
22	lime	211
13	shale	224
10	lime	234
6	shale	240
37	lime	277
16	shale	293
9	lime	302
18	shale	320
6	lime	326
9	shale	335
9	lime	344
41	shale	385
6	lime	391
2	shale	393
14	lime	407
7	shale	414
23	lime	437
12	shale	449
<b>7</b>	lime	456
172	shale	628
4	lime	632
4	shale	636
12	lime	648
3	shale	651

Longanecker#I-18		Page 2
2	lime	653
14	shale	667
2	lime	669
5	shale	674
14	lime	688
21	shale -	709
5	lime	714
76	shale	790
5	broken sand	795 brown, lite oil show, some gas
54	shale	849
. 1	broken sand	850
10	shale	860
1	coal	861
32	shale	893
1	limey sand	894
13	shale	907
1	limey sand	908
1	silty shale	909
1	oil sand	910
4	broken sand	914 oil sand & silty sand
4	silty shale	918
9.5	shale	927.5
0.5	coal	928
52	shale	980 TD

Drilled a 9 7/8" hole to 84.8' Drilled a 5 5/8" hole to 980'

Set 84.8' of 7" surface casing cemented by Consolidated Oil Well Service

Set 965.3' of 2 7/8" threaded and coupled 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp.

	API ONSOLIDATED III Well Services, LLC	-15-091-23440-0	0.07	TICKET NUME	2+2-4100	.942 r lader
	r 800-467-8676	ELD TICKET & TREA CEMEN	IT			
DATE	CUSTOMER# WE	LL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-18-11	6337 Lang	anecker I-18	NW 30	14	22	JO
CUSTOMER	Resources		TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	ss		51/2	Ala	S. L. to	DRIVER
15621	W87 Ste	262 IZIP CODE	368	Kent	K 9+	
1	UC.	66219	DUP	HaroldB	TAR	· · · · · · · · · · · · · · · · · · ·
henero	1		1018 H 980	11mh	72 -7	-7/*
		HOLE DEI H	H	CASING SIZE & V		18
CASING DEPTH	<u>965</u> DRILL PIPE	TUBING			OTHER	
SLURRY WEIGH			SN	CEMENT LEFT in	CASING	
REMARKS: 14	ed i real Me		Blishe		- M.	5-0
0 10	en cred Me	thing 1000	Plushe	1 1 411	P III	red
-ana	de Som	and due	7000	hole	104100	a by
P - na	lated cemen	+ Flughed	Aimp.	Pumper	n. aluna	
rasin	TD .11.11	held goo	P.ST C	2 + Fla	picific	- OV
indue	S I.C. Meder	110.00 000 1		100	in Lic	orea
1 min -	\					
ACCOUNT	GUANITY OF UNITS		f SERVICES or PR		Lan A	TOTAL
·		DESCRIPTION 0	f SERVICES or PR		Latur A UNIT PRICE	TOTAL
ACCOUNT		DESCRIPTION 0	f SERVICES or PR		Lotte A	ТотаL 925,22
ACCOUNT CODE 5401 5406	QUANITY or UNITS	DESCRIPTION o PUMP CHARGE MILEAGE		орист		TOTAL 925,22 120.00
ACCOUNT	QUANITY OF UNITS	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ju	f SERVICES or PR			975,22
ACCOUNT CODE 5401 5406	QUANITY or UNITS	DESCRIPTION O PUMP CHARGE MILEAGE Casing fi Ton miles		орист	UNIT PRICE	975,22 120.00
ACCOUNT CODE 5401 5406	QUANITY OF UNITS	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ju				975,22
ACCOUNT CODE 5401 5406	QUANITY OF UNITS	DESCRIPTION O PUMP CHARGE MILEAGE Casing fi Ton miles	potase.			975,22 120.00
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ACCOUNT CODE 5401 5406	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.		UNIT PRICE	975,22 120.00
ACCOUNT CODE 5401 5406 5402 3407 3502(	QUANITY or UNITS 1 30 965 12 12 2	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C				925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502(	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing fi Ton miles	potase.			925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502( 11183 1124	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.		UNIT PRICE	925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502( 11183 1124	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.			925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502( 11183 1124	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.			925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502( 11183 1124	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.			925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502( 11183 1124	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.			925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502( 11183 1124	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.			925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502( 11183 1124	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.			925,00 120.00 165,00 180,00
ACCOUNT CODE 3401 3406 3402 3407 3502C	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.		SALES TAX	925,00 120.00 165,00 180,00
ACCOUNT CODE 5401 5406 5402 3407 3502( 11183 1124	QUANITY or UNITS 1 30 965 1/2 m/n 2 345 H	DESCRIPTION O PUMP CHARGE MILEAGE Casing Ji Ton miles BO UG C	potase.			925,00 120.00 165,00 180,00

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form