

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

Operator: License # 32278
Name: Tengasco, Inc.
Address: PO Box 458
City/State/Zip: Hays, KS 67601
Purchaser: _____
Operator Contact Person: Gary Wagner
Phone: (785) 625-6374
Contractor: Name: Anderson Drilling
License: 33237
Wellsite Geologist: Rod Tremblay
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

API No. 15 - 195-22421-00-00
County: Trego
SW SE NE SE Sec. 15 Twp. 15 S. R. 25 East West
1400 feet from S / N (circle one) Line of Section
360 feet from E / W (circle one) Line of Section

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 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. _____
02-06-07 02-16-07 02-~~18~~-07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Mai Well #: 1
Field Name: Good Science (Abandoned)
Producing Formation: _____
Elevation: Ground: 2240' Kelly Bushing: 2245'
Total Depth: 4470' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 247' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan *P+ A KGR 3/10/08*
(Data must be collected from the Reserve Pit)
Chloride content 11,000 ppm Fluid volume 150 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.: _____

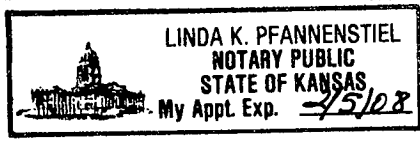
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Gary Wagner
Title: Production Manager Date: 10-15-07
Subscribed and sworn to before me this 15th day of October,
20 07.
Notary Public: Linda K Pfannenstiel
Date Commission Expires: 2/5/10

KCC Office Use ONLY

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



RECEIVED
KANSAS CORPORATION COMMISSION
OCT 17 2007
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Tengasco, Inc. Lease Name: Mai Well #: 165-21,147
 Sec. 15 Twp. 15 S. R. 25 East West County: Trego

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 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: Dual Induction, Neutron Density, Micro & PE	<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>3754</td> <td>-1306</td> </tr> <tr> <td>Toronto</td> <td>3773</td> <td>-1319</td> </tr> <tr> <td>Lansing</td> <td>3795</td> <td>-1341</td> </tr> <tr> <td>BLKC</td> <td>4089</td> <td>-1635</td> </tr> <tr> <td>Pawnee</td> <td>4212</td> <td>-1758</td> </tr> <tr> <td>Fort Scott</td> <td>4286</td> <td>-1832</td> </tr> <tr> <td>Cherokee</td> <td>4320</td> <td>-1866</td> </tr> <tr> <td>Mississippi</td> <td>4389</td> <td>-1935</td> </tr> </table>	Name	Top	Datum	Heebner	3754	-1306	Toronto	3773	-1319	Lansing	3795	-1341	BLKC	4089	-1635	Pawnee	4212	-1758	Fort Scott	4286	-1832	Cherokee	4320	-1866	Mississippi	4389	-1935
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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	12-1/4"	8-5/8"	23#	247'	Com	170	3%CC 2% Gel

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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run			
						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date of First, Resumerd Production, SWD or Enhr.			Producing Method					
			<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 type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) <input type="checkbox"/> Dry Hole	_____

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 17 2007
CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., INC.

26584

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

SERVICE POINT: 4B

DATE <u>2-17-07</u>	SEC. <u>15</u>	TWP. <u>15s</u>	RANGE <u>25w</u>	CALLED OUT <u>1:30pm</u>	ON LOCATION <u>7:30pm</u>	JOB STARTS <u>10:30pm</u>	JOB FINISHES <u>11:30pm</u>
LEASE <u>MAI</u>	WELL # <u>1</u>	LOCATION <u>UTICA 2E 3N 1E 3N</u>			COUNTY <u>Trego</u>	STATE <u>K.S.</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)		<u>1 1/2 E N 1/2 S</u>					

CONTRACTOR A+A Rig 2
 TYPE OF JOB Rotary Plug
 HOLE SIZE _____ T.D. 4470 ft
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 1910 ft
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

EQUIPMENT

PUMP TRUCK CEMENTER M. Kern
 # 151 HELPER Randy
 BULK TRUCK _____
 # 341 DRIVER David J.
 BULK TRUCK _____
 # _____ DRIVER _____

REMARKS:

25 sk at 1910 ft
100 sk at 880 ft
40 sk at 295 ft
10 sk at 70 ft
15 sk at Rat Hole

OWNER _____

CEMENT AMOUNT ORDERED 190 #10 6 Lge 1/4" Plastic

COMMON	<u>114 sk</u>	@	<u>10.65</u>	<u>1214.10</u>
POZMIX	<u>76 sk</u>	@	<u>5.80</u>	<u>440.80</u>
GEL	<u>10 sk</u>	@	<u>16.65</u>	<u>166.50</u>
CHLORIDE		@		
ASC		@		
<u>PRO SEAL</u>	<u>RECEIVED</u>	@	<u>2.00</u>	<u>96.00</u>

KANSAS CORPORATION COMMISSION

OCT 17 2007

CONSERVATION DIVISION
MUSKOGEE

HANDLING	<u>202 sk</u>	@	<u>1.90</u>	<u>383.80</u>
MILEAGE	<u>202 sk 09</u>	@	<u>35</u>	<u>636.30</u>
TOTAL				<u>2937.00</u>

SERVICE

DEPTH OF JOB 1910 ft
 PUMP TRUCK CHARGE _____ 85.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 35 @ 6.00 210.00
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL 1025.00

PLUG & FLOAT EQUIPMENT

1-8 1/2" old Hole Plug @ 35.00 35.00
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL 35.00

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

CHARGE TO: TENGASCO Inc
 STREET _____
 CITY _____ STATE _____ ZIP _____

Thank
you
AP

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 Bryan Guel

PRINTED NAME _____

ALLIED CEMENTING CO., INC.

264

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

SERVICE POINT:
Great Be

DATE <i>2.6.07</i>	SEC. <i>15</i>	TWP. <i>15</i>	RANGE <i>25</i>	CALLED OUT <i>1:00 AM</i>	ON LOCATION <i>4:00 AM</i>	JOB START <i>8:00 AM</i>	JOB FIN <i>8:30</i>
LEASE <i>Mai</i>	WELL # <i>1</i>	LOCATION <i>Collyer 18 1/2 south</i>			COUNTY <i>Juego</i>	STATE <i>Kan</i>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<i>1 1/2 east, north into</i>				

CONTRACTOR *A + A*
 TYPE OF JOB *Surface*
 HOLE SIZE *12 1/4* T.D. *250'*
 CASING SIZE *8 5/8 23#* DEPTH *247'*
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. *15'*
 PERFS. _____
 DISPLACEMENT *14.7*

OWNER *Jengasco*
 CEMENT
 AMOUNT ORDERED *170 dx Common*
3% CC 2% gel

EQUIPMENT
U.B.
 PUMP TRUCK CEMENTER *J.D. Dreiling*
 #*181* HELPER *Rick Pray*
 BULK TRUCK
 #*341* DRIVER *David Juergensen*
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<i>170</i>	@	<i>10.65</i>	<i>181</i>
POZMIX		@		
GEL	<i>3</i>	@	<i>16.65</i>	<i>4</i>
CHLORIDE	<i>5</i>	@	<i>46.60</i>	<i>23</i>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>178</i>	@	<i>1.90</i>	<i>33</i>
MILEAGE	<i>35.9.178</i>			<i>56</i>
TOTAL				<i>299</i>

REMARKS:

Ran 8 5/8 casing to Bottom, circ w rig mud. Hook up to pump tub & mixed 170 dx common 3% CC 2% gel. Shut down change valves over, release 8 5/8 TWP & displace with 14.7 BBLS fresh H₂O. Cement did circulate. Shut in manifold.

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE				<i>81</i>
EXTRA FOOTAGE		@		
MILEAGE	<i>35</i>	@	<i>6.00</i>	<i>210</i>
MANIFOLD		@		
<i>Head rental</i>		@		<i>100</i>
		@		
TOTAL				<i>112</i>

CHARGE TO: *Jengasco Inc.*
 STREET *P.O. Box 458*
 CITY *Hays* STATE *Kansas* ZIP *67601*

PLUG & FLOAT EQUIPMENT

<i>1. 8 5/8 TWP</i>	@		<i>60</i>
	@		
	@		
	@		
	@		
TOTAL <i>60</i>			

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.

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 _____

SIGNATURE *X Gary Wagner*

PRINTED NAME _____

Thank you!