

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

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

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: Murfin Drlg
 License: 30606
 Wellsite Geologist: Mike Bair
 Designate Type of Completion:
 _____ New Well _____ Re-Entry _____ Workover
 Oil _____ SWD _____ SLOW _____ Temp. Abd.
 _____ Gas _____ ENHR _____ SIGW
 Dry _____ Other (Core, WSW, Expl., Cathodic, 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./SWD
 _____ Plug Back _____ Plug Back Total Depth
 _____ Commingled _____ Docket No. _____
 _____ Dual Completion _____ Docket No. _____
 _____ Other (SWD or Enhr.?) _____ Docket No. _____

<u>06-27-07</u>	<u>07-05-07</u>	<u>07-06-07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 195-22458-00-00
 County: Trego
NW SE SW NE Sec. 8 Twp. 15 S. R. 25 East West
520 feet from (S) N (circle one) Line of Section
1780 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Howard Well #: 1
 Field Name: Unnamed
 Producing Formation: _____
 Elevation: Ground: 2381 Kelly Bushing: 2386
 Total Depth: 4393 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 262 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 D+A AIT I NR
 (Data must be collected from the Reserve Pit) 1-9-09
 Chloride content 6000 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 15 day of Oct,
 2007.
 Notary Public: Linda K Pfannenstiel
 Date Commission Expires: 2/5/08

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

Operator Name: Tengasco, Inc. Lease Name: Howard Well #: 1
 Sec. 8 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	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1854</td> <td>+532</td> </tr> <tr> <td>Toronto</td> <td>3678</td> <td>-1292</td> </tr> <tr> <td>Lansing</td> <td>3698</td> <td>-1312</td> </tr> <tr> <td>BLKC</td> <td>3990</td> <td>-1604</td> </tr> <tr> <td>Pawnee</td> <td>4128</td> <td>-1742</td> </tr> <tr> <td>Fort Scott</td> <td>4196</td> <td>-1810</td> </tr> <tr> <td>Cherokee</td> <td>4220</td> <td>-1834</td> </tr> <tr> <td>Mississippi</td> <td>4290</td> <td>-1904</td> </tr> </table>	Name	Top	Datum	Anhydrite	1854	+532	Toronto	3678	-1292	Lansing	3698	-1312	BLKC	3990	-1604	Pawnee	4128	-1742	Fort Scott	4196	-1810	Cherokee	4220	-1834	Mississippi	4290	-1904
Name	Top	Datum																										
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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#	262	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 Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) Dry Hole

Production Interval _____

RECEIVED
 KANSAS CORPORATION COMMISSION

OCT 17 2007

 CONSERVATION DIVISION

ALLIED CEMENTING CO., INC.

30468

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

SERVICE POINT:

Great Bend

DATE 7.5.07	SEC. 8	TWP. 15	RANGE 25	CALLED OUT 4:00AM	ON LOCATION 7:30AM	JOB START 8:00AM	JOB FINISH 10:00AM
LEASE Howard	WELL # 1	LOCATION Arnold north to Deadend			COUNTY Trego	STATE Kansas	
<input checked="" type="radio"/> OLD OR NEW (Circle one)				2 west, 3 1/2 north			

CONTRACTOR **Murfin 16**

TYPE OF JOB **Plug**

HOLE SIZE **7 7/8** T.D. **4553'**

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE **4 1/2 XH** DEPTH **1860'**

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER **Tengasco Inc.**

CEMENT AMOUNT ORDERED **200 AX 60/40 6% Gel**

1/4# floeal per ax.

COMMON	120 AX	@	11.10	1332.00
POZMIX	80 AX	@	6.20	496.00
GEL	10 AX	@	16.65	166.50
CHLORIDE		@		
ASC		@		
FLOEAL	50#	@	2.00	100.00
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	212 AX.	@	1.90	402.80
MILEAGE	212 AX.	09	32	610.56
				TOTAL 3107.86

EQUIPMENT

Ness

PUMP TRUCK CEMENTER **J.D. Drailing**

224 HELPER **Jim Weighous**

BULK TRUCK

342 DRIVER **Don Dugan**

BULK TRUCK

_____ DRIVER _____

REMARKS:

1st	1860'	25 AX
2nd	900'	100 AX
3rd	300'	40 AX
4th	40'	10 AX
Rathole	—	15 AX
Mousehole	—	10 AX

SERVICE

DEPTH OF JOB	1860'		
PUMP TRUCK CHARGE			815.00
EXTRA FOOTAGE		@	
MILEAGE	32	@	6.00
MANIFOLD		@	
		@	
		@	
TOTAL 1007.00			

CHARGE TO: **Tengasco Inc.**

STREET **P.O. Box 458**

CITY **Hays** STATE **Kansas** ZIP **67601**

Thanks

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL _____			

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 DAYS

SIGNATURE **X [Signature]**

PRINTED NAME

Thank you!

ALLIED CEMENTING CO., INC.

30462

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

SERVICE POINT:

Great Bend

DATE <u>6-27-07</u>	SEC. <u>8</u>	TWP. <u>15</u>	RANGE <u>25</u>	CALLED OUT <u>6:00 PM</u>	ON LOCATION <u>8:00 PM</u>	JOB START <u>9:30 PM</u>	JOB FINISH <u>10:30 AM</u>
LEASE <u>Howard</u>	WELL # <u>1</u>	LOCATION <u>Arnold 4 north west to</u>			COUNTY <u>Trego</u>	STATE <u>Kansas</u>	
OLD OR <input checked="" type="radio"/> (Circle one)			<u>130th rd. 3 north west into</u>				

CONTRACTOR Murfin
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 263'
 CASING SIZE 8 5/8 DEPTH 262'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG 15'
 PERFS. _____
 DISPLACEMENT 15 1/2 BBLs

OWNER Tengasco
 CEMENT
 AMOUNT ORDERED 170 ax Common
3% cc 2% gel

EQUIPMENT
Ness
 PUMP TRUCK CEMENTER J.D. Dreiling
 # 224 HELPER Jim Weighous
 BULK TRUCK
 # 342 DRIVER Don Dugan
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<u>170</u>	@	<u>11.10</u>	<u>1887.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>16.65</u>	<u>49.95</u>
CHLORIDE	<u>5</u>	@	<u>46.60</u>	<u>233.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>178</u>	@	<u>1.90</u>	<u>338.20</u>
MILEAGE	<u>32.9</u>	@	<u>178</u>	<u>512.64</u>
TOTAL				<u>3020.79</u>

REMARKS:

Ran 8 5/8 casing to Bottom
Circulate with rig mud.
Hook up to pump truck & mixed
170 ax Common 3% cc 2% gel.
Shut down change valves over &
release 8 5/8 TWP. Displace with 15 1/2
BBLs fresh H²O. Cement did circulate.

SERVICE

DEPTH OF JOB	<u>263'</u>		
PUMP TRUCK CHARGE			<u>815.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>32</u>	@	<u>6.00</u>
MANIFOLD		@	
<u>Headrental</u>		@	<u>100.00</u>
TOTAL <u>1107.00</u>			

CHARGE TO: Tengasco Inc.
 STREET P.O. Box 458
 CITY Hayes STATE Kansas ZIP 67601

PLUG & FLOAT EQUIPMENT

<u>1. 8 5/8 TWP</u>	@	<u>60.00</u>
	@	
	@	
	@	
	@	
TOTAL <u>60.00</u>		

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 DAYS

SIGNATURE X [Signature]

X
 PRINTED NAME _____

THANK YOU!