

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 34349
Name: Pharyn Resources, LLC
Address 1: 15621 W 87TH ST
Address 2: STE 262
City: Lenexa State: KS Zip: 66219
Contact Person: Phil Frick
Phone: (913) 221-5987
CONTRACTOR: License # 32079
Name: John E. Leis
Wellsite Geologist: None
Purchaser: Coffeyville Resources
Designate Type of Completion:
[X] New Well [] Re-Entry [] Workover
[] Oil [] WSW [] SWD [] SIOW
[] Gas [] D&A [X] ENHR [] SIGW
[] OG [] GSW [] Temp. Abd.
[] CM (Coal Bed Methane)
[] Cathodic [] Other (Core, Expl., etc.):

API No. 15 - 107-24200-0000
Spot Description:
SE_NW_SW_NW Sec. 30 Twp. 20 S. R. 22 [X] East [] West
3,379 Feet from [] North / [X] South Line of Section
4,799 Feet from [X] East / [] West Line of Section
Footages Calculated from Nearest Outside Section Corner:
[] NE [] NW [X] SE [] SW
County: Linn
Lease Name: Brownrigg Well #: 69
Field Name: Goodrich-Parker
Producing Formation: Squirrel
Elevation: Ground: 916 est Kelly Bushing: NA
Total Depth: 601.0 Plug Back Total Depth: 595.0
Amount of Surface Pipe Set and Cemented at: 20.0 Feet
Multiple Stage Cementing Collar Used? [] Yes [X] No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 596.0
feet depth to: surface w/ 73 sx cmt.

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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 #:
7/21/2010 7/21/2010 7/21/2010
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: ppm Fluid volume: bbls
Dewatering method used:
Location of fluid disposal if hauled offsite:
Operator Name:
Lease Name: License #:
Quarter Sec. Twp. S. R. [] East [] West
County: Permit #:

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.

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.

Signature: [Signature]
Title: Agent Date: 12/6/10

KCC Office Use ONLY

[] Letter of Confidentiality Received
Date:
[] Confidential Release Date:
[X] Wireline Log Received
[] Geologist Report Received
[X] UIC Distribution
ALT [] I [X] II [] III Approved by: [Signature] Date: 1/10/11

Operator Name: Pharyn Resources, LLC Lease Name: Brownrigg Well #: 69
 Sec. 30 Twp. 20 S. R. 22 East West County: Linn

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Squirrel 548.0 +368 <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED DEC 23 2010 KCC WICHITA </div>
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CASING RECORD <input 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	9 7/8"	7"	NA	20.0'	Portland	8	NA
Production	5 5/8"	2 7/8"	NA	596.0'	50/50 Poz	73	See Service Ticket

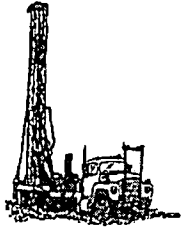
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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
2 spf	548.0-550.0 - 5 perfs - 2" DML RTG		
2 spf	557.0-560.0 - 7 perfs - 2" DML RTG		

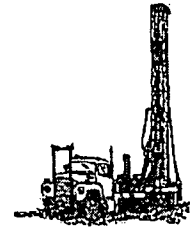
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. Pending Permit	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____				
Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf NA	Water Bbls. NA	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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LEIS OIL SERVICES



111 East Mary • Yates Center, Kansas 66783 • (620) 625-3676

Operator License #: 34349	API #: 15-107-24200-00-00
Operator: Pharyn Resources, LLC.	Lease: Brownrigg
Address: 15621 87 th Lenexa, KS	Well #: 69
Phone: 913-669-2235	Spud Date: 7/21/10 Completed: 7/21/10
Contractor License: 32079	Location: SE-NW-SW-NW of 30-20-22E
T.D. : 601 T.D. of Pipe: 596	3305 Feet From South
Surface Pipe Size: 7" Depth: 20'	4785 Feet From East
Kind of Well: Oil	County: Linn

Set 20' of 7" surface casing, cemented to surface with 8sx Portland Cement

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
4	Soil	0	4				
1	Clay	4	5				
3	Gravel	5	8				
28	Shale	8	36				
7	Lime	36	43				
11	Shale	43	54				
29	Lime	54	83				
8	Shale	83	91				
3	Black Shale	91	94				
45	Lime	94	139				
165	Shale	139	304				
15	Lime	304	319				
3	Shale	319	322				
7	Lime	322	329				
56	Shale	329	385		T.D.		601
15	Lime	385	400				
10	Shale	400	410		T.D. of Pipe		596
3	Lime	410	413				
29	Shale	413	442				
8	Lime	442	450				
21	Shale	450	471				
4	Lime	471	475				
40	Shale	475	515				
12	Oil Sand w/ shale	515	527				
40	Broken Oil Sand	527	567				
16	Shale	567	583				
1	Lime	583	584				
17	Shale	584	601				

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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27030

LOCATION Ottawa, KS

FOREMAN Cathy Kennedy

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/22/10	6337	Brownrigg # 69	NW 30	20	22	LN
CUSTOMER Pharya Resources						
MAILING ADDRESS 15611 W 87th						
CITY Lenexa		STATE KS	ZIP CODE 66219			
		TRUCK #	DRIVER	TRUCK #	DRIVER	
		389	Casey	CK		
		368	Ken Ham	KH		
		510	Cec Par	CHP		
		370	Cholam	CWL		

JOB TYPE longstring HOLE SIZE 5 5/8" HOLE DEPTH 601' CASING SIZE & WEIGHT 2 7/8" EVE
 CASING DEPTH 596' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2-2 1/2" rubber plugs
 DISPLACEMENT 3.47 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 100 # Premium Gel followed by 10 bbls fresh water, mixed & pumped 73 sks 50/50 Pozmix cement w/ 270 Premium Gel + 1/2 # Phenoseal per sk, cement to surface, flushed pump clean, displaced 2 2 1/2" rubber plugs to casing, TD w/ 3.47 bbls fresh water, pressured to 700 PSI, released pressure to set float valve, shut in casing.

Handwritten signature

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE cement pump		925.00
5406	-	MILEAGE pump truck on lease		-
5407A	107.31	ton mileage		128.77
5502C	1 1/2 hrs	80 bbl Vac Truck		150.00
1124	71 sks	50/50 Pozmix cement		698.64
1118B	223 #	Premium Gel		44.60
1107A	37 #	Phenoseal		42.55
4402	2	2 1/2" rubber plug		46.00
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				NO 235465
				6.370
				SALES TAX
				ESTIMATED
				TOTAL
				52.40
				2087.96

Revin 3737

AUTHORIZATION _____ TITLE _____ DATE _____

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.