

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:

New Well Re-Entry Workover

Oil WSW SWD SLOW
 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>7/23/2010</u>	<u>7/23/2010</u>	<u>7/23/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 107-24202-0000

Spot Description: _____
SE SW NE SW NW Sec. 30 Twp. 20 S. R. 22 East West
3,359 Feet from North / South Line of Section
4,265 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Linn
Lease Name: Brownrigg Well #: 71

Field Name: Goodrich-Parker
Producing Formation: Squirrel

Elevation: Ground: 916 est Kelly Bushing: NA
Total Depth: 601.0 Plug Back Total Depth: 596.0

Amount of Surface Pipe Set and Cemented at: 21.0' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 596.0

feet depth to: surface w/ 67 _____ sx cmt.

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: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dlg Date: 1/10/11

Operator Name: Pharyn Resources, LLC Lease Name: Brownrigg Well #: 71
 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 Yes No
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
(If no, Submit Copy)

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Squirrel	540.0	+376

RECEIVED
DEC 23 2010
KCC WICHITA

List All E. Logs Run:
Gamma Ray/Neutron/CCL

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	21.0'	Portland	8	NA
Production	5 5/8"	2 7/8"	NA	596.0'	50/50 Poz	67	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	540.0-544.0 - 9 perfs - 2" DML RTG		
2 spf	552.0-558.0 - 13 perfs - 2" DML RTG		

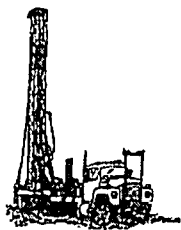
TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. **Pending Permit**

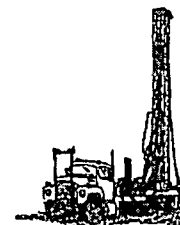
Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NA	NA	NA		

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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LEIS OIL SERVICES



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

Operator License #: 34349		API #: 15-107-24202-00-00	
Operator: Pharyn Resources, LLC.		Lease: Brownrigg	
Address: 15621 87 th Lenexa, KS		Well #: 71	
Phone: 913-669-2235		Spud Date: 7/23/10 Completed: 7/23/10	
Contractor License: 32079		Location: SE-NE-SW-NW of 30-20-22E	
T.D. : 601	T.D. of Pipe: 596	3305	Feet From South
Surface Pipe Size: 7"	Depth: 21'	4125	Feet From East
Kind of Well: Oil		County: Linn	

Set 21' of 7" surface casing, cemented to surface with 8sx Portland Cement

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
6	Soil	0	6	23	Shale	491	514
1	Clay	6	7	7	Oil Sand w/ Shale	514	521
2	Gravel	7	9	23	Oil Sand	521	544
20	Shale	9	29	6	Sandy Shale	544	550
10	Lime	29	39	6	Oil Sand	550	556
6	Shale	39	45	3	Shale	556	559
35	Lime	45	80	2	Black Shale	559	561
4	Shale	80	84	40	Shale	561	601
2	Black Shale	84	86				
25	Lime	86	111				
7	Shale	111	118				
2	Lime	118	120				
3	Shale	120	123				
5	Lime	123	128				
171	Shale	128	299		T.D.		601
13	Lime	299	312				
7	Shale	312	319		T.D. of Pipe		596
5	Lime	319	324				
53	Shale	324	377				
18	Lime	377	395				
7	Shale	395	402				
4	Lime	402	406				
28	Shale	406	434		RECEIVED		
10	Lime	434	444		DEC 23 2010		
19	Shale	444	463		KCC WICHITA		
2	Lime	463	465				
16	Shale	465	481				
8	Lime	481	489				
2	Black Shale	489	491				



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 26896
LOCATION Ottawa, KS
FOREMAN Jim Green

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
7-23-10	6337	Brownrigg #71	NW 30	20	22	LN	
CUSTOMER Phayn Resources LLC			TRUCK # DRIVER TRUCK # DRIVER				
MAILING ADDRESS 15621 W 87th St Ste 262			Jim Gre JL				
CITY STATE ZIP CODE Lenexa KS 66219			Ken Hen KH				
			Chuck Lee WJ				
			Tom White JH				
JOB TYPE	LONGHAY	HOLE SIZE	5 7/8"	HOLE DEPTH	601'	CASING SIZE & WEIGHT	2 1/2"
CASING DEPTH	596'	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT		SLURRY VOL		WATER gal/sk		CEMENT LEFT in CASING	
DISPLACEMENT		DISPLACEMENT PSI		MIX PSI		RATE	

REMARKS: Establish circulation mix and pump 100' to flush hole. Mix and pump 67 sk 50% Poz Mix cement with 2% Gel 1/2" Phenoseal. Flush pump clear of cement. Pump 2-2 1/2" rubber plugs to total depth of casing, circulating cement to surface. Pressure well up to 800" PSI. Well held, set float, shut valve.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	0hc	PUMP CHARGE Cement Pump 2042 wells		925.00
5406	35.2	MILEAGE Pump TK		63.88
5402	596'	Casing Footage		N/C
5502C	1 1/2 HRS	VAL TK		150.00
5407A	1/2 min	Bulk TK Ton mileage		157.50
1124	65 sk	50% Poz Mix Cement RECEIVED		639.60
1107A	33#	Phenoseal DEC 23 2010		37.95
4402	2	2 1/2" Rubber Plugs KCC WICHITA		46.00
1118B	225#	Premium Gel		45.00
		WO 235538		
		SALES TAX		48.42
		ESTIMATED TOTAL		2113.35

Revin 3737

AUTHORIZATION Tracy 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.