

KANSAS CORPORATION COMMISSION 1071973  
OIL & GAS CONSERVATION DIVISION

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, STE 262

Address 2:

City: LENEXA State: KS Zip: 66219 +

Contact Person: Phil Hudnall

Phone: ( 913 ) 390-7022

CONTRACTOR: License # 8509

Name: Evans Energy Development, Inc.

Wellsite Geologist: NA

Purchaser:

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SIOW
- 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 #:

6/3/2011    6/4/2011    6/6/2011

Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date    Recompletion Date

API No. 15 - 15-091-23441-00-00

Spot Description:

SW\_NW\_NE\_SW Sec. 30 Twp. 14 S. R. 22  East  West2200 Feet from  North /  South Line of Section3950 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

 NE     NW     SE     SW

County: Johnson

Lease Name: LONGANECKER Well #: I-19

Field Name: Longanecker

Producing Formation: Bartlesville

Elevation: Ground: 1064 Kelly Bushing: 0

Total Depth: 960 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 85 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 0

feet depth to: 85 w/ 12 sx cmt.

## Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1500 ppm Fluid volume: 80 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

Quarter Sec. Twp. S. R.  East  West

County: Permit #:

## 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: Deanna Garrison Date: 01/17/2012



Operator Name: Pharyn Resources, LLC Lease Name: LONGANECKER Well #: I-19  
 Sec. 30 Twp. 14 S. R. 22  East  West County: Johnson

**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 Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	GammaRay	
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Electric Log Submitted Electronically (If no, Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run:			
GammaRay/Neutron/CCL			

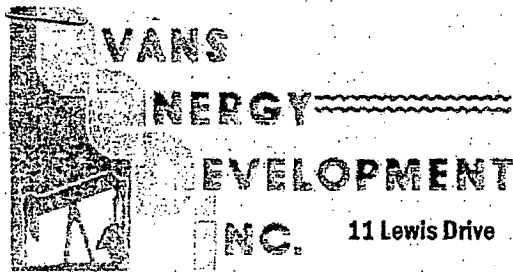
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9	7	10	85	Portland	12	50/50 POZ
Completion	5.6250	2.8750	8	940	Portland	130	50/50 POZ

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 (Amount and Kind of Material Used)	Depth
3	904.0-911.0	2" DML RTG	7

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed 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: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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11 Lewis Drive

Paola, KS 66071

Oil & Gas Well Drilling  
Water Wells  
Geo-Loop Installation

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

WELL LOG

Pharyn Resources, LLC  
Longanecker #-19  
API # 15-091-23,441  
June 3 - June 6, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
7	soil & clay	7
5	sandstone	12
5	shale	17
63	sandstone	80
2	lime	82
24	shale	106
16	lime	122
8	shale	130
9	lime	139
6	shale	145
23	lime	168
16	shale	184
22	lime	206
10	shale	216
13	lime	229
23	shale	252
20	lime	272
17	shale	289
9	lime	298
18	shale	316
28	lime	344
45	shale	389
77	lime	466 base of the Kansas City
165	shale	631
7	lime	638
5	shale	643
16	lime	659
6	broken sand	665 brown, lite bleeding
5	shale	670
11	lime	681
44	shale	725
29	lime	754
14	shale	768
10	lime	778
126	shale	904
1	broken sand	905 good bleeding

Longanecker #1-19

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7	oil sand	912
1	broken sand	913 good bleeding, laminated
5	silty shale	918
42	shale	960 TD

Drilled a 9 7/8" hole to 84.6'

Drilled a 5 5/8" hole to 960'

Set 84.6' of 7" surface casing cemented by Consolidated Oil Well Service.

Set 945.5' of 2 7/8" threaded and coupled 8 round upset tubing including 4 centralizers, 1 float shoe, 1 clamp.



**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 32568

LOCATION Ottawa KS

FOREMAN Fred Mader

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-6-11	6337	Longmeyer # I-19	<del>SW</del> NW 30	14	22	JO

CUSTOMER		TRUCK #	DRIVER	TRUCK #	DRIVER
Phayn Resources		506	Fred	Safety Mfg	
MAILING ADDRESS		268	Ken	KH	
15621 W 57th Ste 262		370	Aiken	APM	
CITY	STATE	ZIP CODE			
Chanute	KS	66720			

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 2596 CASING SIZE & WEIGHT 2 7/8 EUE  
 CASING DEPTH 300 DRILL PIPE 940 TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2" Plug  
 DISPLACEMENT 546 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 BPM

REMARKS: Establish circulation. Mix + Pump 100# Premium Gel  
Flush. Mix + Pump 130 sks 50/50 Por Mix Cement 270 Gel  
1/2# Pheno Seal/sk Cement to Surface. Flush pump + lines clean  
Displace 2 1/2" Rubber plug to casing TD w/ 5.46 BBL Fresh water.  
Pressure to 800# PSI. Hold pressure for 30 min. MIT.  
Release pressure to set float valve Shut in casing

Evans Energy Dev. Inc (Kenny)

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925 <sup>00</sup>
5406	30mi	MILEAGE		120 <sup>00</sup>
5402	940'	Casing footage		N/C
5407	1/2 Minimum	Ton of Miles		165 <sup>00</sup>
55020	2 1/2 hrs	80 BBL Vae Truck		225 <sup>00</sup>
<del>1124</del>	130 SKS	50/50 Por Mix Cement		1358 <sup>50</sup>
1116B	319#	Premium Gel		63 <sup>80</sup>
1107A	65#	Pheno Seal		793 <sup>00</sup>
4402	2	2 1/2" Rubber Plugs		56 <sup>00</sup>
		<u>WD # 241994</u>		
			7.525	SALES TAX
				ESTIMATED
				TOTAL
				117 <sup>21</sup>
				319 <sup>81</sup>

**SCANNED**

Revin 3737

AUTHORIZATION [Signature] 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 to

Summary of Changes

Lease Name and Number: LONGANECKER I-19

API/Permit #: 15-091-23441-00-00

Doc ID: 1071973

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Approved Date	01/11/2012	01/17/2012
Save Link	../kcc/detail/operatorE ditDetail.cfm?docID=10 71572	../kcc/detail/operatorE ditDetail.cfm?docID=10 71973

Summary of Attachments

Lease Name and Number: LONGANECKER I-19

API: 15-091-23441-00-00

Doc ID: 1071973

Correction Number: 1

Attachment Name