



KANSAS CORPORATION COMMISSION 1071391  
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: \_\_\_\_\_

API No. 15 - 15-091-23442-00-00  
Spot Description: \_\_\_\_\_  
SE NE SW NW Sec. 30 Twp. 14 S. R. 22  East  West  
3326 Feet from  North /  South Line of Section  
4019 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Johnson  
Lease Name: LONGANECKER Well #: 26  
Field Name: Longanecker

Producing Formation: Bartlesville  
Elevation: Ground: 1069 Kelly Bushing: 0  
Total Depth: 980 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 87 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: 87 w/ 12 sx cmt.

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 #: \_\_\_\_\_

<u>5/24/2011</u>	<u>5/26/2011</u>	<u>5/27/2011</u>
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: 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 Gerriso Date: 01/11/2012



1071391

Operator Name: Pharyn Resources, LLC Lease Name: LONGANECKER Well #: 26  
 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 <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:  GammaRay/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum GammaRay
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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	9	7	10	87.3	Portland	12	50/50 POZ
Completion	5.6250	2.8750	8	963	Portland	151	50/50 POZ

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
____ Perforate				
____ Protect Casing	-			
____ Plug Back TD				
____ 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
3	917.0-923.0	2" DML RTG	6

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 <i>(Explain)</i> _____	
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 <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input 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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**VANS  
ENERGY  
DEVELOPMENT  
INC.**

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 #26

API # 15-091-23,442

May 24 - May 27, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
7	soil & clay	7
6	sandstone	13
6	shale	19
66	sandstone	85
1	lime	86
9	shale	95
10	lime	105
6	shale	111
14	lime	125
10	shale	135
9	lime	144
7	shale	151
8	lime	159
6	shale	165
7	lime	172
17	shale	189
21	lime	210
10	shale	220
16	lime	236
19	shale	255
22	lime	277
14	shale	291
7	lime	298
2	shale	300
2	lime	302
15	shale	317
11	lime	328
10	shale	338
2	lime	340
3	shale	343
6	lime	349
46	shale	395
14	lime	409
9	shale	418
24	lime	442
190	shale	632
3	lime	635
3	shale	638

2	lime	640
8	shale	648
18	lime	666
5	shale	671
7	lime	678
33	shale	711
23	lime	734
60	shale	794
6	broken sand	800 brown sand, lite bleeding, 60% broken sand, 40% silty shale
14	shale	814
6	lime	820
12	shale	832
5	lime	837
32	shale	869
5	grey sand	874
42	shale	916
1	broken sand	917
1	oil sand	918
4	broken sand	922
8	silty shale	930
45	shale	975 TD

Drilled a 9 7/8" hole to 87.3'

Drilled a 5 5/8" hole to 975'

Set 87.3' of 7" surface casing cemented by Consolidated Oil Service.

Set 963' of 2 7/8" threaded and coupled 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp.



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 31969

LOCATION Ottawa KS

FOREMAN Fred Mader

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
5/27/11	6337	Longaneker # 26	NW 30	14	22	JO
CUSTOMER Pharvin Resources LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 15621 W 87 <sup>th</sup> St St 262			506	Fred	Safety Mtg	
CITY Lenexa	STATE KS	ZIP CODE 66219	495	Cassy	CK	
			370	Arken	ARM	
			503	Gar MDO	GM	

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 975' CASING SIZE & WEIGHT 2 3/8 BUE  
 CASING DEPTH 962' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2" Plug  
 DISPLACEMENT 5.6 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 53 BPM

REMARKS: Establish circulation, Mix + Pump 300# Premium Gel Flush,  
Mix + Pump 151 sks 50/50 Por Mix Cement 2% Gel 1/2" Plug  
Seal/sk. Cement to Surface. Flush pump + lines clean + Displace  
2 - 2 1/2" Rubber plug to casing TD w/5.6 BBL Fresh water. Pressure  
to 750# PSI. Release pressure to set float valve, Shut in  
Casing.

Evans Energy Dev. Inc

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975 <sup>00</sup>
5406	30 mi	MILEAGE		120 <sup>00</sup>
5402	962.	Casing footage		N/A
5407	1/2 Minimum	Ten Miles		165 <sup>00</sup>
5502C	2 1/2 hrs	80 BBL Use Truck		225 <sup>00</sup>
1124	252.5/ks	50/50 Por Mix Cement		1577 <sup>95</sup>
1118B	554 <sup>#</sup>	Premium Gel		110 <sup>50</sup>
1107A	76 <sup>#</sup>	Pheno Seal		927 <sup>3</sup>
4402	2	2 1/2" Rubber Plugs		56 <sup>00</sup>
		<u>WO #24163D</u>		
			7.525%	SALES TAX
				ESTIMATED
				TOTAL
				138 <sup>27</sup>
				3460 <sup>74</sup>

Form 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