



KANSAS CORPORATION COMMISSION 1071572  
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     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 #: \_\_\_\_\_  
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  West  
2200 Feet from  North /  South Line of Section  
3950 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 Garcia Date: 01/11/2012



1071572

Operator Name: Pharyn Resources, LLC Lease Name: LONGANECKER Well #: I-19
Sec. 30 Twp. 14 S. R. 22 [x] 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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken [ ] Yes [x] No
Samples Sent to Geological Survey [ ] Yes [x] No
Cores Taken [ ] Yes [x] No
Electric Log Run [x] Yes [ ] No
Electric Log Submitted Electronically [x] Yes [ ] No
List All E. Logs Run: GammaRay/Neutron/CCL


CASING RECORD [x] New [ ] Used
Report all strings set-conductor, surface, intermediate, production, etc.
Table with columns: 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

ADDITIONAL CEMENTING / SQUEEZE RECORD
Table with columns: Purpose, Depth Top Bottom, Type of Cement, # Sacks Used, Type and Percent Additives

PERFORATION RECORD - Bridge Plugs Set/Type
Specify Footage of Each Interval Perforated
Table with columns: Shots Per Foot, PERFORATION RECORD, Acid, Fracture, Shot, Cement Squeeze Record, Depth

TUBING RECORD: Size: Set At: Packer At: Liner Run: [ ] Yes [ ] No
Date of First, Resumed Production, SWD or ENHR. Producing Method: [ ] Flowing [ ] Pumping [ ] Gas Lift [ ] 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
METHOD OF COMPLETION: [ ] Open Hole [ ] Perf. [ ] Dually Comp. [ ] Commingled [ ] Other (Specify)
PRODUCTION INTERVAL:

 <b>GEOMAX SYSTEMS</b> 7750 W. 11th Avenue Suite 200 Denver, CO 80202 Phone: (303) 751-1000 Fax: (303) 751-1001 E-Mail: info@geomax.com	
<b>Customer:</b> GEOMAX SYSTEMS 7750 W. 11th Avenue Suite 200 Denver, CO 80202 Phone: (303) 751-1000 Fax: (303) 751-1001 E-Mail: info@geomax.com	<b>Project:</b> GEOMAX SYSTEMS 7750 W. 11th Avenue Suite 200 Denver, CO 80202 Phone: (303) 751-1000 Fax: (303) 751-1001 E-Mail: info@geomax.com
<b>Order No.:</b> 1000000000 <b>Date:</b> 10/15/2000 <b>Order Type:</b> New Order <b>Order Status:</b> Open <b>Order Total:</b> \$0.00	<b>Customer Ref.:</b> GEOMAX SYSTEMS 7750 W. 11th Avenue Suite 200 Denver, CO 80202 Phone: (303) 751-1000 Fax: (303) 751-1001 E-Mail: info@geomax.com

Delivery Customer  
 Frito-Lay, Inc.

Order No. 1000000000  
 Date 10/15/2000  
 Order Type New Order  
 Order Status Open  
 Order Total \$0.00

