



KANSAS CORPORATION COMMISSION 1071562  
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 Hundall  
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 #: \_\_\_\_\_

<u>6/1/2011</u>	<u>6/2/2011</u>	<u>6/12/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-091-23444-00-00

Spot Description: \_\_\_\_\_  
NW\_NE\_SW\_NW Sec. 30 Twp. 14 S. R. 22  East  West  
3733 Feet from  North /  South Line of Section  
4458 Feet from  East /  West Line of Section

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

County: Johnson  
Lease Name: LONGANECKER Well #: 28  
Field Name: Longanecker  
Producing Formation: Bartlesville  
Elevation: Ground: 1060 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.

**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 Garlick Date: 01/11/2012



1071562

Operator Name: Pharyn Resources, LLC Lease Name: LONGANECKER Well #: 28  
 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	Portland	12	50/50 POZ
Completion	5.6250	2.8750	8	969	Portland	135	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 (Amount and Kind of Material Used)	Depth
3	901.0-908.0	2" DML RTG	7

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  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 <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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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**VANS  
ENERGY  
DEVELOPMENT  
NC.**

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 #28  
API # 15-091-23,444  
June 1 - June 2, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
7	soil & clay	7
7	sandstone	14
2	shale	16
65	sandstone	81
2	lime	83
10	shale	93
6	lime	99
5	shale	104
14	lime	118
8	shale	126
11	lime	137
5	shale	142
33	lime	175
5	shale	180
25	lime	205
6	shale	211
18	lime	229
19	shale	248
20	lime	268
15	shale	283
10	lime	293
20	shale	313
2	lime	315
13	shale	328
9	lime	337
38	shale	375
18	lime	393
2	shale	395
3	lime	398
9	shale	407
22	lime	429
3	shale	432
5	lime	437
4	shale	441
9	lime	450
186	shale	636

12	lime	648
18	shale	666
4	broken sand	670 brown, lite bleeding, 60% bleeding sand, 40% silty shale
4	silty shale	674
17	shale	691
2	lime	693
9	shale	702
10	lime	712
50	shale	762
9	lime	771
129	shale	900
1	broken sand	901 good oil show, 80% bleeding sand, 20% white sand
5	oil sand	906
3	broken sand	909 good bleeding, 70% bleeding sand, 30% silty shale
5	silty shale	914
66	shale	980 TD

Drilled a 9 7/8" hole to 87.1'  
 Drilled a 5 5/8" hole to 980'

Set 87.1' of 7" surface casing cemented Consolidated Oil Services.

Set 969.5' 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 31977

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
6/2/11	6337	Longanacker 28	NW 30	14	22	JO
CUSTOMER Pharyn Resources LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 15621 W 87th			506	Fred	Safety Mtg	
CITY Lenexa			495	Cason	CJC	
STATE KS			370	Arlet	AMM	
ZIP CODE 66219			558	Cecil	CDD	

JOB TYPE long string HOLE SIZE 5 1/8 HOLE DEPTH 980 CASING SIZE & WEIGHT 2 3/8" EUE  
 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 5 BPM

REMARKS: Establish circulation. Mix + Pump 100# Premium Gel Flush. Mix + Pump 135 sks 50/50 Poz Mix Cement 2 3/8" 1/2" Pheno Seal pack cement to surface. Flush pump + lines clean. Displace 2 1/2" rubber plug to casing TD w/ 5.6 BBL fresh water. Pressure to 700# PSI - Release pressure to set float valve. Shut in casing.

Evans Energy Dev. Serv. (Kansas)

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975.00
5406	30 mi.	MILEAGE		120.00
5402	969	Casing footage		N/C
5407	1/2 minimum	Ten Miles		165.00
5502	2 hrs	80 BBL Vac Truck		180.00
1124	1356 sks	50/50 Poz Mix Cement	140.75	
118B	327 #	Premium Gel		65.40
1109A	68 #	Pheno Seal		82.26
4402	2	2 1/2" Rubber Plug		22.00
				56.00
		WD 241750		
			7.625%	121.53
			SALES TAX	121.53
			ESTIMATED TOTAL	3176.04

Rev'n 5737

AUTHORIZATION BK

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.