



KANSAS CORPORATION COMMISSION 1071557  
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 #: \_\_\_\_\_

<u>5/27/2011</u>	<u>5/29/2011</u>	<u>6/1/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-091-23443-00-00  
Spot Description: \_\_\_\_\_  
SW NE SW NW Sec. 30 Twp. 14 S. R. 22  East  West  
3326 Feet from  North /  South Line of Section  
4416 Feet from  East /  West Line of Section

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

County: Johnson  
Lease Name: LONGANECKER Well #: 27  
Field Name: Longanecker  
Producing Formation: Bartlesville  
Elevation: Ground: 1060 Kelly Bushing: 0  
Total Depth: 960 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 86 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: 86 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 Carter Date: 01/11/2012



1071557

Operator Name: Pharyn Resources, LLC Lease Name: LONGANECKER Well #: 27  
 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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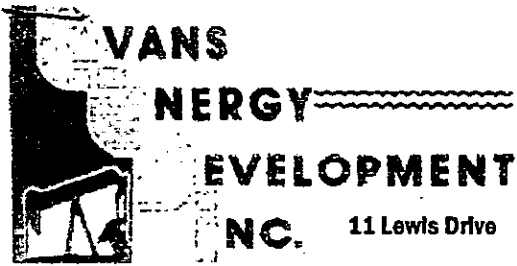
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9	7	10	86	Portland	12	50/50 POZ
Completion	5.6250	2.8750	8	944	Portland	137	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	913.0-919.0	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 (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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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 #27

API # 15-091-23,443

May 27 June 1, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
3	soil & clay	3
8	sandstone	11
3	shale	14
69	sandstone	83
1	lime	84
14	shale	98
27	lime	125
20	shale	145
13	lime	158
11	shale	169
3	lime	172
19	shale	191
27	lime	218
3	shale	221
13	lime	234
22	shale	256
27	lime	283
8	shale	291
13	lime	304
12	shale	316
10	lime	326
6	shale	332
20	lime	352
19	shale	371
2	lime	373
9	shale	382
33	lime	415
4	shale	419
18	lime	437
13	shale	450
4	lime	454
178	shale	632
6	lime	638
6	shale	644
10	lime	654
3	broken sand	657 brown sand, good bleeding
9	shale	666
2	lime	668

6	shale	674
2	lime	676
7	shale	683
5	lime	688
18	shale	706
15	lime	721
10	shale	731
17	lime	748
13	shale	761
19	lime	780
18	shale	798
16	lime	814
97	shale	911
3	sandstone	914 white
3	broken sand	917 lite blecding, 60% bleeding sand, 40% white sand
3	silty shale	920
40	shale	960 TD

Drilled a 9 7/8" hole to 86.3'

Drilled a 5 5/8" hole to 960'

Set 86.3' of 7" surface casing cemented by Consolidated Oil Well Service.

Set 944' of 2 7/8" threaded and coupled 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp.



**CONSOLIDATED**  
Oil Well Services, LLC

API # 15-091-23443-00.00

TICKET NUMBER 31982

LOCATION off a w g

FOREMAN Alan 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
6-1-11	6337	Kansanaker #27	NW 30	14	22	30
CUSTOMER <u>Pharyn Resources</u>			TRUCK #			
MAILING ADDRESS <u>15621 W 87th Ste 262</u>			DRIVER			
CITY <u>Leawea</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>66219</u>			TRUCK #			
JOB TYPE <u>long string</u>			DRIVER			
HOLE SIZE <u>5 1/8</u>			TRUCK #			
HOLE DEPTH <u>958</u>			DRIVER			
CASING SIZE & WEIGHT <u>2 7/8</u>			TRUCK #			
CASING DEPTH <u>944</u>			DRIVER			
SLURRY WEIGHT			TRUCK #			
SLURRY VOL			DRIVER			
WATER gal/sk			TRUCK #			
CEMENT LEFT in CASING <u>yes</u>			DRIVER			
DISPLACEMENT <u>5 1/2</u>			TRUCK #			
DISPLACEMENT PSI <u>800</u>			DRIVER			
MIX PSI <u>200</u>			TRUCK #			
RATE <u>5 bpm</u>			DRIVER			
REMARKS: <u>Held crew meeting, established rate. Mixed &amp; pumped 100# gel to flush hole followed by 137 sk 50/50 pot, 200 gel, 1/2 # P3. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float. Closed valve.</u>						

Evans Energy, Kenny.

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
3401	1	PUMP CHARGE		975.00
3406	30	MILEAGE		120.00
3402	9.441'	Casing footage		
3407	1/2 min	ten miles		165.00
3302C	1 1/2	80 gal		135.00
1107A	69#	Pheno seal		84.18
1118B	330#	gel		66.00
1124	137	50/50 pot		1431.65
4402	2	2 1/2 plug		58.00
				<b>SCANNED</b>
				<u>WD # 241742</u>
SALES TAX				127.24
ESTIMATED TOTAL				3155.07

Rev 8757

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