

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1071566

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		API No. 15 - 15-091-23438-00-00
	sources, LLC	· · · · · · · · · · · · · · · · · · ·	Spot Description:
Address 1: 15621 W 8	7TH ST, STE 262		NE_NW_SW_NW Sec. 30 Twp. 14 S. R. 22 East West
Address 2:			
City: _LENEXA	State: KS z	p: <u>66219</u> +	
Contact Person: Phil I	ludnall		Footages Calculated from Nearest Outside Section Corner:
Phone: (913) 39	0-7022		□ne □nw ☑se □sw
CONTRACTOR: Licens	_{e #} 8509		County: Johnson
Name: Evans Energ			Lease Name: LONGANECKER Well #: I-16
			Field Name: Longanecker
Purchaser:			Producing Formation: Bartlesville
Designate Type of Comp	eletion:		Elevation: Ground: 1062 Kelly Bushing: 0
New Well	Re-Entry	Workover	Total Depth: 990 Plug Back Total Depth:
	_	□ slow	Amount of Surface Pipe Set and Cemented at: 83 Feet
☐ Gas ☐ □	=	☐ sigw	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
□ 965 □ E	GSW ☐ GSW	Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Me	_		If Alternate II completion, cement circulated from:
Cathodic C)ther (Core, Expl., etc.):		feet depth to: 83 w/ 12 sx cmt.
If Workover/Re-entry: O	ld Well Info as follows:		reet depth to: sx cmt.
Operator:			
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:	Original T	otal Depth:	
<u> </u>		ENHR Conv. to SWD	Chloride content: 1500 ppm Fluid volume: 80 bbls
	Conv. to	o GSW	Dewatering method used: Evaporated
Plug Back:	PIL	ig Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled	Permit #:		Operator Name:
Dual Completion	Permit #:		Lease Name: License #:
SWD	Permit #:		
ENHR	Permit #:		Quarter Sec TwpS. R East West
☐ GSW	Permit #:		County: Permit #:
6/6/2011	6/7/2011	6/12/2011	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date	

AFFIDAVIT

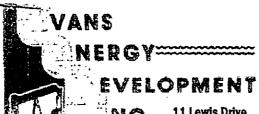
I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY
Letter of Confidentiality Received
Date:
Confidential Release Date:
☑ Wireline Log Received
Geologist Report Received
☑ UIC Distribution
ALT I I II Approved by: Dearns Genter Date: 01/11/2012



Operator Name: Phar	<u>yn Resources, l</u>	LC	Lease	Name: _	ONGANECK	ER	_ Well #: _ [-1	6		
Sec. 30 Twp. 14 S. R. 22 Fast West				John	son					
time tool open and clos	ed, flowing and shu if gas to surface te	d base of formations per t-in pressures, whether s st, along with final chart well site report.	shut-in pres	sure read	hed static level,	hydrostatic pre	ssures, bottom l	nole temp	erature, fluid	
Drill Stem Tests Taken Yes V No (Attach Additional Sheets)				L	Log Formation (Top), Depth and Datum			Sample		
Samples Sent to Geological Survey Cores Taken Electric Log Run Electric Log Submitted Electronically (If no, Submit Copy)		☐ Yes		Name Top GammaRay			Тор	(Oatum (
List All E. Logs Run:										
GammaRay/Neutron	CCL									
			RECORD	✓ Ne						
Purpose of String	Size Hole Drilled	Report all strings set Size Casing Set (In O.D.)	-conductor, s Wei Lbs.	ght	ermediate, production Setting Depth	on, etc. Type of Cement	# Sacks Used		and Percent dditives	
Surface	9	7	10		83	Portland	12	50/50 (POZ	
Completion	5.6250	2.8750	8		975	Portland	140	50/50	50/50 POZ	
		ADDITIONA	I CEMENTI	NG / SOL	JEEZE RECORD			<u> </u>		
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks			Type and	Percent Additives	3		
Shots Per Foot	PERFORATION RECORD - Bridge Plugs S Specify Footage of Each Interval Perfora				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			Depth		
3 912.0-920.0				2" DML RTG			88		88	
TUBING RECORD:	Size:	Set At:	Packer A	At:	Liner Run:	Yes []	lo			
Date of First, Resumed F	Production, SWD or EN	HR. Producing Me	thod:		Gas Lift 🔲 O	ther (Explain)				
Estimated Production Per 24 Hours	Oil	Bbis. Gas	Mcf	Wat	er Bi	bis.	Gas-Oil Ratio		Gravity	
DISPOSITIO Vented Sold (If vented, Subr	Used on Lease	Open Hole	METHOD OI	_	Comp. Com	nmingled nit ACO-4)	PRODUCTI	ON INTER	VAL:	



Oil & Gas Well Drilling **Water Wells Geo-Loop Installation**

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

11 Lewis Drive

Paola, KS 66071

WELL LOG Pharyn Resources, LLC Longanecker #1-16 API # 15-091-23,438 June 6 - June 7, 2011

Thickness of Strata	Formation	<u>Total</u>
7	soil & clay	7
10	sandstone	17
8	shale	25
57	sandstone	82
2	lime	84
21	shale	105
21	lime	126
8	shale	134
10	lime	144
6	shale	150
21	lime	171
20	shale	191
19	lime	210
11	shale	221
24	lime	245
12	shale	257
20	lime	277
15	shale	292
13	lime	305
10	shale	315
10	lime	32 5
7	shale	332
12	lime	344
39	shale	383
25	lime	408
5	shale	413
15	lime	428
7	shale	435
22	lime	457 base of the Kansas City
189	shale	646
8	lime	654
4	shale	658
5	broken sand	663 brown, lite odor
22	shale	685
6	lime	691
23	shale	714

Longanecker #I-16		Page 2
3	lime	717
51	shale	768
9	lime	777
135	shale	912
1	broken sand	913 good show, 80% broken sand 20% silty shale
5	oil sand	918
1	broken sand	919 lite oil show, very laminated
5	silty shale	924
66	shale	990 TD

Orilled a 9 7/8" hole to 83.1' Drilled a 5 5/8" hole to 990'

Set 83.1' of 7" surface casing cemented by Consolidated Oil Well Service.

Set 975' of 2 7/8" threaded and coupled 8 round upset tubing including 4 centralizers, 1 float shoe, 1 clamp.



LOCATION ON AUGUS

FOREMAN Fred Mader

DATE

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

FIELD TICKET & TREATMENT REPORT

620-431-9210 or 800-467-8676 CEMENT TOWNSHIP WELL NAME & NUMBER SECTION RANGE COUNTY DATE CUSTOMER# <u> 200</u> 30 10 TRUCK# DRIVER TRUCK# DRIVER MAILING ADDRESS 506 Fred <u>w</u> 87+70 5te 262 368 ZIP CODE CITY STATE 369 66219 KS 970 HOLE SIZE HOLE DEPTH **CASING SIZE & WEIGHT** DRILL PIPE TUBING_ CASING DEPTH CEMENT LEFT IN CASING 25 **SLURRY VOL** WATER gal/sk SLURRY WEIGHT_ DISPLACEMENT 5, 67 BB

Evans Energy Dew Inc (Konny)

	02			
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	/	PUMP CHARGE		975-00
5406	30-71:	MILEAGE		120 8
5402	975	Caring too tage		ν/c
5407	Monomism	You Miles		₹30°00
_55020	2 hrs	80 BBL Vac Truck		1800
	1405Ks	50/50 Por Mix Comest		1463
1124 1118-B	336#	Premium Col SCAN	MED	6>3
11074		Pheno Scal		854
4402	/-	2% " Rubber Plug		200
	······································		 	
		WO# 242045		
				· · · · · · · · · · · · · · · · · · ·
		7525%	SALES TAX	123 59
rvin 9737	7 - 10 N		ESTIMATED TOTAL	3372 ²⁹

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

TITLE

1

AUTHORIZTION_