



KANSAS CORPORATION COMMISSION 1089444
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 # 34648
Name: A & L Energy Operations LLC
Address 1: 575 MADISON AVENUE 22ND FL
Address 2: _____
City: NEW YORK State: NY Zip: 10022 + _____
Contact Person: Andrew Pietra
Phone: (212) 586-6665
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>6/28/2012</u>	<u>6/29/2012</u>	<u>8/6/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-045-21774-00-00

Spot Description: _____
NE NE SW NE Sec. 6 Twp. 14 S. R. 21 East West
1520 Feet from North / South Line of Section
1520 Feet from East / West Line of Section

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

County: Douglas
Lease Name: Thoren Well #: 81

Field Name: _____
Producing Formation: Bartlesville

Elevation: Ground: 905 Kelly Bushing: 0

Total Depth: 755 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 42 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____
feet depth to: 42 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 Garrisor Date: 08/09/2012



1089444

Operator Name: A & L Energy Operations LLC Lease Name: Thoren Well #: 81
 Sec. 6 Twp. 14 S. R. 21 East West County: Douglas

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
--	---

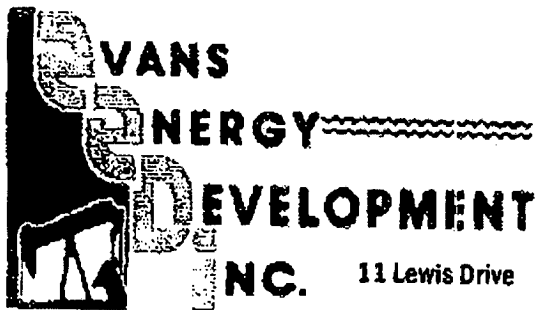
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9	7	10	42	Portland	12	50/50 POZ
Completion	5.6250	2.8750	8	745	Portland	102	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	687.0-694.0	2" DML RTG	7

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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
---	--	--



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

A & L Energy Operations, LLC

Thoren #81

API #15-045-21,774

June 28 - June 29, 2012

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
16	soil & clay	16
44	shale	60
11	lime	71
3	shale	74
20	lime	94
6	shale	100
7	lime	107
10	shale	117
17	lime	134
33	shale	167
15	lime	182
47	shale	229
8	lime	237
14	shale	251
13	lime	264
3	shale	267
2	lime	269
18	shale	287
12	lime	299
20	shale	319
11	lime	330
3	shale	333
35	lime	368
7	shale	375
25	lime	400
3	shale	403
15	lime	418
170	shale	588
5	lime	593
7	shale	600
4	lime	604
25	shale	629
5	lime	634
53	shale	687
7	oil sand	694
61	shale	755

base of the Kansas City

oil show 567

brown, good bleeding

TD

Thoren #81

Page 2

Drilled a 9 7/8" hole to 42.5'

Drilled a 5 5/8" hole to 755'

Set 42.5' of 7" casing threaded and coupled cemented with 12 sacks of cement.

Set 745' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 37369
LOCATION Ottawa KS
FOREMAN Fred Maden

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
6/29/12	3898	Tharion # 81	NW 7	15	20	D6.

CUSTOMER Asl Energy Operations LLC
MAILING ADDRESS 575 Madison Ave 2nd FL
CITY New York STATE NY ZIP CODE 10022

TRUCK #	DRIVER	TRUCK #	DRIVER
506	Fred Mad	Safety	Mad
495	Har Bee	WB	J
369	Der Mas	DM	
510	Set Tuc	ST	

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 755' CASING SIZE & WEIGHT 2 7/8" EUE
CASING DEPTH 745' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/blk _____ CEMENT LEFT in CASING 2 1/2" Plug
DISPLACEMENT 4.33 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Establish pump rate. Mix + Pump 100# Gel Flush. Mix + Pump 102 sks 50/50 Por Mix Cement 2% Gel. Cement to Surface Flush pump + line clean. Displace 2 1/2" Rubber plug to casing TD. Pressure to 800# PSI. Release pressure to set float valve. Shut in casing.

Evans Energy Dev. Inc. - Travis Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	-	MILEAGE	6	N/C
5402	745	Casing footage		N/C
5407	1/2 minimum	Ton Miles	510	175 ⁰⁰
5502C	1 1/2 hr	80 BBL Vac Truck	369	135 ⁰⁰
1124	102 sks	50/50 Por Mix Cement		1116 ⁹⁰
1118B	272#	Premium Gel		57 ¹²
4402	1	2 1/2" Rubber plug		28 ⁰⁰
			7.32	SALES TAX
				ESTIMATED TOTAL
				87 ²⁵
				2629 ²⁷

SCANNED.

Rev 0737

AUTHORIZATION

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.