



KANSAS CORPORATION COMMISSION 1089442
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>6/26/2012</u>	<u>6/27/2012</u>	<u>8/6/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-045-21773-00-00

Spot Description: _____
NW NW SE NE Sec. 6 Twp. 14 S. R. 21 East West
1520 Feet from North / South Line of Section
1190 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Douglas

Lease Name: Thoren Well #: 80

Field Name: Little Wakarusa

Producing Formation: Bartlesville

Elevation: Ground: 906 Kelly Bushing: 0

Total Depth: 762 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 44 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: 44 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 Garrison Date: 08/09/2012



1089442

Operator Name: A & L Energy Operations LLC Lease Name: Thoren Well #: 80
 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 <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>GammaRay</td> <td></td> <td></td> </tr> </table>	Name	Top	Datum	GammaRay		
Name	Top	Datum					
GammaRay							

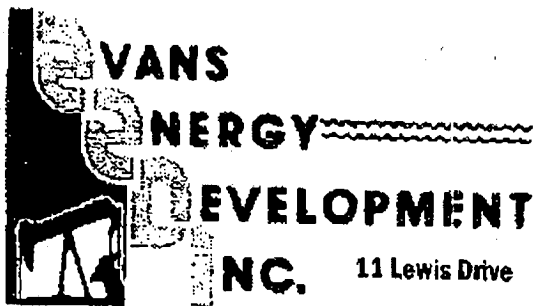
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9	7	10	44	Portland	12	50/50 POZ
Completion	5.6250	2.8750	8	752	Portland	112	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	684.0-694.0	2" DML RTG	10

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 Bbbs.	Gas Mcf	Water Bbbs. 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
INC.**

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 # 80

API #15-045-21,773

June 26 - June 27, 2012

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
16	soil & clay	16
44	shale	60
31	lime	91
6	shale	97
8	lime	105
9	shale	114
18	lime	132
33	shale	165
18	lime	181
47	shale	228
8	lime	236
13	shale	249
18	lime	267
51	shale	318
30	lime	348
5	shale	353
15	lime	368
7	shale	375
23	lime	398
3	shale	401
15	lime	416 base of the Kansas City
168	shale	584 oil show 570
7	lime	591
3	shale	594
6	lime	600
5	shale	605
8	lime	613
13	shale	626
7	lime	633
7	shale	640
4	lime	644
40	shale	684
9	oil sand	693 brown, good bleeding
1	broken sand	694 brown & green sand, good bleeding
68	shale	762 TD

Thoren #80

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Drilled a 9 7/8" hole to 44.5'

Drilled a 5 5/8" hole to 762'

Set 44.5' of 7" casing threaded and coupled cemented with 12 sacks of cement

Set 751.8' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.



CONSOLIDATED
Oil Well Services, LLC

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

**FIELD TICKET & TREATMENT REPORT
CEMENT**

TICKET NUMBER 37368
LOCATION Ottawa KS
FOREMAN Fred Mader

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6/28/12	3898	Therem # 80	NE 6	14	21	OG
CUSTOMER Add Energy Operations LLC			TRUCK #			
MAILING ADDRESS 575 Madison Ave 2nd FL			DRIVER		TRUCK #	
CITY New York			DRIVER		TRUCK #	
STATE NY			DRIVER		TRUCK #	
ZIP CODE 10022			DRIVER		TRUCK #	
JOB TYPE <u>long string</u>			DRIVER		TRUCK #	
HOLE SIZE <u>5 7/8</u>			DRIVER		TRUCK #	
HOLE DEPTH <u>762</u>			DRIVER		TRUCK #	
CASING SIZE & WEIGHT <u>2 7/8 EUE</u>			DRIVER		TRUCK #	
CASING DEPTH <u>752'</u>			DRIVER		TRUCK #	
DRILL PIPE			DRIVER		TRUCK #	
TUBING			DRIVER		TRUCK #	
SLURRY WEIGHT			DRIVER		TRUCK #	
SLURRY VOL			DRIVER		TRUCK #	
WATER gal/sk			DRIVER		TRUCK #	
CEMENT LEFT in CASING <u>2 1/2" Plug</u>			DRIVER		TRUCK #	
DISPLACEMENT <u>4.37 BBL</u>			DRIVER		TRUCK #	
DISPLACEMENT PSI			DRIVER		TRUCK #	
MIX PSI			DRIVER		TRUCK #	
RATE <u>50 PPM</u>			DRIVER		TRUCK #	

REMARKS: Establish pump rate. Mix Pump 100* Gal Flush. Mix Pump
112 sks 50/50 for Mix Cement 20 Gal. Cement to Surface. Flush
pump + lines 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 Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	30 mi	MILEAGE	495	120 ⁰⁰
5402	252	Casing Footage		NIC
5407	Minimum	Ten Miles	510	350 ⁰⁰
5500C	2 hrs	80 BBL Vac Truck	369	180 ⁰⁰
1124	112 sks	50/50 Por Mix Cement		1226 ¹⁰
118B	258 ⁰⁰	Premium Gel		60 ¹⁸
4402	1	2 1/2" Rubber plug		25 ⁰⁰
			73%	SALES TAX
				ESTIMATED
				TOTAL
				3090 ⁸⁷

SCANNED

Rev'n 3737

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.