

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1081097

Form ACO-1
August 2013
Form must be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #			API No. 15				
Name:			Spot Description:				
Address 1:			Sec.	TwpS. R	East _ West		
Address 2:			F6	eet from	South Line of Section		
City: S	tate: Zi	p:+	Fe	eet from East / V	West Line of Section		
Contact Person:			Footages Calculated from	Nearest Outside Section Co	orner:		
Phone: ()			□ NE □ NV	V □SE □SW			
CONTRACTOR: License #			GPS Location: Lat:	, Long:			
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)		
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84			
Purchaser:			County:				
Designate Type of Completion:			Lease Name:	We	ell #:		
New Well Re	-Entry	Workover	Field Name:				
	_	_	Producing Formation:				
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW □ SIGW	Elevation: Ground: Kelly Bushing:				
☐ OG	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total De	epth:		
CM (Coal Bed Methane)	dow	тетір. Ава.	Amount of Surface Pipe Se	et and Cemented at:	Feet		
Cathodic Other (Con	e. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No		
If Workover/Re-entry: Old Well In			If yes, show depth set:		Feet		
Operator:			If Alternate II completion, of	cement circulated from:			
Well Name:			feet depth to:	w/	sx cmt.		
Original Comp. Date:	Original To	otal Depth:					
Deepening Re-perf.	Conv. to E	NHR Conv. to SWD	Drilling Fluid Manageme	nt Plan			
☐ Plug Back	Conv. to G	SW Conv. to Producer	(Data must be collected from t				
O constitued and	D		Chloride content:	ppm Fluid volume:	bbls		
CommingledDual Completion			Dewatering method used:				
SWD			Location of fluid disposal if	f haulad offsita:			
☐ ENHR			Location of fluid disposal fi	nauled offsite.			
GSW			Operator Name:				
_			Lease Name:	License #:			
Spud Date or Date Rea	ached TD	Completion Date or	QuarterSec	TwpS. R	East _ West		
Recompletion Date		Recompletion Date	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	
Confidentiality Requested	
Date:	
Confidential Release Date:	
Wireline Log Received	
Geologist Report Received	
UIC Distribution	
ALT I II Approved by: Date:	

Page Two



Operator Name:				_ Lease l	Name: _			Well #:		
Sec Twp	S. R	East \	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whether s with final chart(shut-in pre s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	tic pressures, bot d.	tom hole temp	erature, flui	d recovery,
Final Radioactivity Lo- files must be submitte						ogs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital el	ectronic log
Drill Stem Tests Taker (Attach Additional S		Yes	☐ No		_		on (Top), Depth ar			mple
Samples Sent to Geo	logical Survey	Yes	No		Nam	е		Тор	Da	tum
Cores Taken Electric Log Run		Yes Yes	☐ No ☐ No							
List All E. Logs Run:										
			CASING		☐ Ne					
		1				ermediate, product		T	_	
Purpose of String	Size Hole Drilled	Size Cas Set (In O		Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used		d Percent itives
		AD	DITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Ce	ement	# Sacks	Used		Type and P	ercent Additives		
Perforate Protect Casing	100 20111111					-				
Plug Back TD Plug Off Zone										
1 lug 0 li 20 lio										
Did you perform a hydrau	ulic fracturing treatment	on this well?				Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to								p question 3)		
Was the hydraulic fractur	ing treatment information	on submitted to the	e chemical c	disclosure re	gistry?	Yes	No (If No, fill	out Page Three	of the ACO-1)
Shots Per Foot		ION RECORD - I					cture, Shot, Cement		d	Depth
						,		,		
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or Ef		ducing Meth Flowing	od:	g 🗌	Gas Lift (Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls. 0	as-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		N/	1ETHOD OF	COMPLE	TION:		PRODUCTION)N INTER\/^	1.
Vented Sold		Open I	_	Perf.	Dually	Comp. Cor	mmingled	THODOCTIC	ZIN IIN I ERVA	L.
	bmit ACO-18.)	Other	(Specific)		(Submit)		mit ACO-4)			

Form	ACO1 - Well Completion
Operator	Tailwater, Inc.
Well Name	WHITESIDE 11-T
Doc ID	1081097

Tops

Name	Тор	Datum
271	lime	base of the KC
463	lime	oil show
485	oil sand	grey, good bleeding
510	"	green, good bleeding
630	broken sand	brown & green sand, good bleeding
672	oil sand	brown, good bleeding
683	sand	black, no oil show
710	broken sand	brown & green sand, light bleeding
746	II .	brown & grey sand, good bleeding
787	sand	black, no oil show



TICKET NUMBER 36659

LOCATION O + 1 qua

FOREMAN Alan Maden

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

FIELD TICKET & TREATMENT REPORT
CEMENT

	CUSTOMER#		NAME & NUME		SECTION	TOWNSHIP	RANGE	COUNTY
4-23-12	7.800	White,5	de	1./.7	Sw a	2 20	20	011
USTOMER	.				A de la contraction de la cont			
AILING ADDRI	10TL/				TRUCK#	DRIVER	TRUCK#	DRIVER
_		1	>•		5/6	Hann	Safely	Meet
TY 6421	mond	STATE	ZIP CODE		368	Casey K	0/2	
DKlaho.			23116		3/0	Keith C	15C	
		OK 5]	348	Vaniel 6	Danseil G	
		.011 0.11	7/6	HOLE DEPTH	1000	_ CASING SIZE & V	VEIGHT_2	8
SING DEPTH		DRILL PIPE		TUBING		•	OTHER	
URRY WEIGH	1	SLURRY VOL_	T DCI KAN	WATER gal/s		CEMENT LEFT in	,	
SPLACEMENT		DISPLACEMENT	2 - 3		00	- 1012	2m_	
LOO F	//	Mee	Λ	CV	~ / ~			ungec
(100	gel to	lowed	1 /-	shed		ement of	1	926
00810	TDI	Vell h	1005	2000	Pump,	+ Tynn-p-	or prus	2 10
casin Jalve	5 1 1/2		ela 80		- 07	e flour	1 0100	100
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Evens	Enersy	Travi	9		. **			<u> </u>
20019	Drie 107	j / 010 .						•
					•		11	110
						AU	Ma	au_
ACCOUNT	QUANITY o	r UNITS	DE	SCRIPTION of	SERVICES or F			
CODE	QUANITY				SERVICES or F		UNIT PRICE	TOTAL
5401.	QUANITY		PUMP CHARG		SERVICES or F			TOTAL
5401.			PUMP CHARG	E				TOTAL
5401 3406 402	QUANITY of The Total of the Tot		PUMP CHARG	E For	2+ase			TOTAL 1030.0
5401			PUMP CHARGE MILEAGE	s for	2+ase			TOTAL
5401 3406 402			PUMP CHARGE MILEAGE	E For	2+ase			TOTAL 1030.0
5401 3406 402			PUMP CHARGE MILEAGE	s for	2+ase			TOTAL 1030.0
5401 3406 402 302C			PUMP CHARGE MILEAGE	s for miles	tase.			TOTAL 1030.0
5401 3406 402	790	3 min	PUMP CHARGE MILEAGE	s for	tase.			TOTAL 1030.0
5401 3406 402 5407		3 min	PUMP CHARGE MILEAGE	s for miles	tase.			1030.00 180.00
5401 3406 402 7407	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.			1030.00 180.00
5401 3406 402 3407	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	UNIT PRICE	1030.00 180.00
5401 3406 402 7407	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	UNIT PRICE	1030.00 180.00
5401 3406 402 302C	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	UNIT PRICE	1030.00 180.00
5401 3406 402 302C	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	UNIT PRICE	1030.00 180.00
5401 3406 402 7407	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	UNIT PRICE	1030.00 180.00
5401 3406 402 3407	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	UNIT PRICE	1030.00 180.00
5401 3406 402 5407	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	UNIT PRICE	1030.00 180.00
5401 3406 402 7407	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	VNIT PRICE	1030.00 180.00
CODE 5401 3406 402 1124 1183 1402	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	UNIT PRICE	1030.00 180.00
5401 3406 402 3407	790	3 min	PUMP CHARGE MILEAGE	s for miles	tase.	PRODUCT	SALES TAX	1030.00 180.00

Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Mark Sievers, Chairman Ward Loyd, Commissioner Thomas E. Wright, Commissioner

May 18, 2012

Chris Martin Tailwater, Inc. 6421 AVONDALE DR STE 212 OKLAHOMA CITY, OK 73116-6428

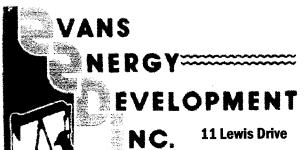
Re: ACO1 API 15-003-25421-00-00 WHITESIDE 11-T SW/4 Sec.22-20S-20E Anderson County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully, Chris Martin



Oil & Gas Well Drilling Water Wells Geo-Loop Installation

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

vis Drive Paola, KS 66071

WELL LOG

Tailwater, Inc. Whiteside #11-T API#15-003-25,421 April 20 - April 23, 2012

Thickness of Strata	<u>Formation</u>	<u>Total</u>
16	soil & clay	16
2	clay & gravel	18
51	shale	69
29	lime	98
64	shale	162
11	lime	173
5	shale	178
37	lime	215
5	shale	220
26	lime	246
3	shale	249
22	lime	271 base of the Kansas City
178	shale	449
14	lime	463 oil show
15	shale	478
7	oil sand	485 grey, good bleeding
1	shale	486
1	coal	487
3	shale	490
20	oil sand	510 green, good bleeding
6	shale	516
1	coal	517
6	shale	523
5	lime	528
17	shale	545
5	lime	550
11	shale	561
10	lime	571
25	shale	596
4	lime	600
24	shale	624
6	broken sand	630 brown & green sand, good bleeding
34	shale	664
1	lime & shells	665
7	oil sand	672 brown, good bleeding
7	silty shale	679
4	sand	683 black, no oil show
22	shale	705
5	broken sand	710 brown & green sand, light bleeding
10	silty shale	720

Whiteside	#1	1-7	ľ
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4	broken sand	724 brown & grey sand, ok bleeding
11	silty shale	735
5	broken sand	740 brown & grey sand, good bleeding
4	oil sand	744 brown, good bleeding
2	broken sand	746 brown & grey sand, good bleeding
14	silty shale	760
9	sand	769 black, no oil show
6	shale	775
12	sand	787 black, no oil show
5	silty shale	792
8	shale	800 TD

Drilled a 9 7/8" hole to 23.9' Drilled a 5 5/8" hole to 800'

Set 23.9' of 7" surface casing cemented with 5 sacks of cement.

Set 790' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.