Confidentiality Requested: Yes No

# KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1097521

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:					
Address 2:	Feet from Dorth / South Line of Section				
City: State: Zip:+	Feet from East / West Line of Section				
Contact Person:	Footages Calculated from Nearest Outside Section Corner:				
Phone: ()					
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: Well #:				
New Well Re-Entry Workover	Field Name:				
	Producing Formation:				
	Elevation:       Ground:       Kelly Bushing:         Total Vertical Depth:       Plug Back Total Depth:         Amount of Surface Pipe Set and Cemented at:       Feet				
Gas D&A ENHR SIGW					
OG GSW Temp. Abd.     CM (Coal Bed Methane)					
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No				
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet				
Operator:	If Alternate II completion, cement circulated from:				
Well Name:	feet depth to:w/sx cmt.				
Original Comp. Date: Original Total Depth:					
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan				
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)				
	Chloride content: ppm Fluid volume: bbls				
Commingled Permit #:	Dewatering method used:				
Dual Completion Permit #:					
SWD Permit #:	Location of fluid disposal if hauled offsite:				
ENHR         Permit #:	Operator Name:				
GSW Permit #:	Lease Name: License #:				
	Quarter Sec TwpS. R East West				
Spud Date or         Date Reached TD         Completion Date or           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 III Approved by: Date:

	Page Iwo	1097521
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken (Attach Additional Sheets)		Yes No		Log Forma	tion (Top), Depth ar	nd Datum	Sample
Samples Sent to Geological Survey		Yes No	N	ame		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING Report all strings set-	RECORD	New Used intermediate, produ	iction, 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
		ADDITIONA	L CEMENTING / S	QUEEZE RECOR	D		
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and P	ercent Additives	
Protect Casing Plug Back TD							
Plug Off Zone							

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

Yes	No
Yes	No

 No
 (If No, skip questions 2 and 3)

 No
 (If No, skip question 3)

No (If No, fill out Page Three of the ACO-1)

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated					e	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			Depth
TUBING RECORD:	ECORD: Size: Set At:			Packer	r At:	Liner Ru	in:	No		
Date of First, Resumed Production, SWD or ENHR. Producing Metho					ping	Gas Lift	Other (Explain)			
Estimated Production Per 24 Hours		Oil Bb	Bbls. Gas		Gas Mcf Wa		er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:				METHOD OF COMPLETIC		TION:	_	PRODUCTION IN	TERVAL:	
Vented Sold Used on Lease Open Hole			Open Hole	Perf.		Comp.	Commingled			
(If vented, Su	(Submit ACO-18.)				,	(Submit ACO-4)				

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/

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner Sam Brownback, Governor

October 15, 2012

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

Re: ACO1 API 15-003-25598-00-00 Wittman 8-IW NE/4 Sec.15-20S-20E Anderson County, Kansas

**Dear Production Department:** 

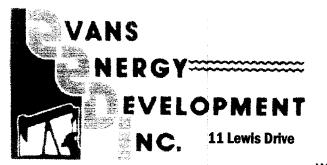
We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

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

Respectfully, Chris Martin

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	ONSOLID/							979
	Qii Well Bervice	m, LLC						A A
BO Bay 884 C		- FIF			TMENT REP	FOREMAN	Alan 1	Made-
	hanute, KS 6672 or 800-467-8676			CEMEN				
DATE	CUSTOMER #		L NAME & NUM		SECTION	TOWNSHIP	RANGE	
112,1,12	7801		++man	8.In				COUNTY
CUSTOMER		F. Wh.	TI-Man	<u> 0.10</u>	<u>SW 15</u>	30	30	
[[] [a:1	Water				TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDR	ESS A	,			516	Alg Mad	Sc fet	Meet
6421	Nonda	ile_			368	DerMas	Dm	
		STATE	ZIP CODE		370	Kiej Car	KC	
NK/ghi	Img City	<u>OK</u>	73116	<b>j</b>	510	SptTur	57	1
JOB TYPE	ing String	HOLE SIZE	57/8	HOLE DEPTH	761	CASING SIZE & V		7/3
	· <u>~75</u>	DRILL PIPE		TUBING			OTHER	
SLURRY WEIG		SLURRY VOL		WATER gal/s	k	CEMENT LEFT in	CASING_1/	25
DISPLACEMEN	т <u>    4.4                               </u>	DISPLACEMEN	NT PSI <u>80</u> 2	MIX PSI	ADD_	RATE 46	pm	
REMARKS: H	eld Cren	Meer	L. Eiste	blished	erate.	Mired	+ Que ma	ed 100#
GPI fi	slowed	l by	103 GK	50150	(EMer	it she	5 200	00/
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		the and	$\geq$				TOTAL	2747.80
AUTHORIZTION	142			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



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

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

#### WELL LOG Tailwater, Inc. Wittman #8-IW (S15) API#15-003-25, 598 September 21 - September 26, 2012

Paola, KS 66071

Thickness of Strata	<b>Formation</b>	Total
8	soil & clay	8
80	shale	88
30	lime	118
63	shale	181
10	lime	191
5	shale	196
35	lime	231
7	shale	238
25	lime	263
3	shale	266
19	lime	285
170	shale	455
3	lime	458
2	shale	460
10	lime	470 oil show
25	shale	495
1	coal	496
3	shale	499
8	oil sand	507 green, ok bleeding
2	shale	509
1	coal	510
4	shale	514
9	lime	523
12	shale	535
7	lime	542
17	shale	559
4	lime	563
19	shale	582
10	lime	592
61	shale	653
1	lime & shells	654
9	oil sand	663 brown, good bleeding
3	broken sand	666 brown & grey, good bleeding
43	shale	709
52	broken sand	761 brown & grey, no oil
		761 TD

## Page 2

Drilled a 9 7/8" hole to 21.1' Drilled a 5 5/8" hole to 761'

Set 21.1' of 7" surface casing cemented with 6 sacks of cement.

Set 751' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.