

WELL COMPLETION FORM ORIGINAL
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32461
Tailwater, Inc.
Name: _____
Address: 6421 Avondale, Ste. 212
City/State/Zip: Oklahoma City, OK 73116
Purchaser: CMT
Operator Contact Person: Christian L. Martin
Phone: (405) 810-0900
Contractor: Name: Evans Energy Development, Inc
License: 8509

Wellsite Geologist: _____
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
11/7/08	11/10/08	n/a

API No. 15 - 003-24637-00-00
County: Anderson
sw ne sw nw Sec. 22 Twp. 20 S. R. 20 East West
1905 _____ feet from S / (circle one) Line of Section
735 _____ feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Kempnich
Lease Name: _____ Well #: 10-IW
Field Name: Garnett Shoestring

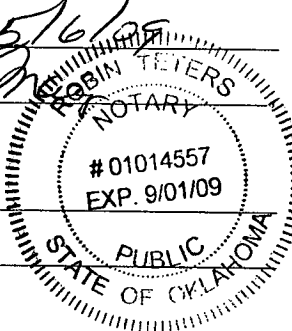
Producing Formation: Bartlesville
Elevation: Ground: 975 Kelly Bushing: n/a
Total Depth: 765' Plug Back Total Depth: n/a
Amount of Surface Pipe Set and Cemented at 25.2 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 0
feet depth to 25.2' w/ 6 sx cmt.

Drilling Fluid Management Plan AH II NCR 5-21-09
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Stacy B. Martin
Agent
Title: _____ Date: 5/6/09
Subscribed and sworn to before me this 6 day of May
20 09
Notary Public: Robb Lett
Date Commission Expires: 9-01-09



KCC Office Use ONLY
N Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution (5/11)

KANSAS CORPORATION COMMISSION
MAY 08 2009
RECEIVED

Operator Name: Tailwater, Inc. Lease Name: Kempnich Well #: 10-IW
 Sec. 22 Twp. 20 S. R. 22 East West County: Anderson

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 copy of all Electric Wireline 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 <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Bartlesville Driller's Log Attached
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CASING RECORD <input 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 7/8"	7"		25.2'	Portland	6	
Completion	5 5/8"	2 7/8"		755.5'	Portland	103	50/50 POZ

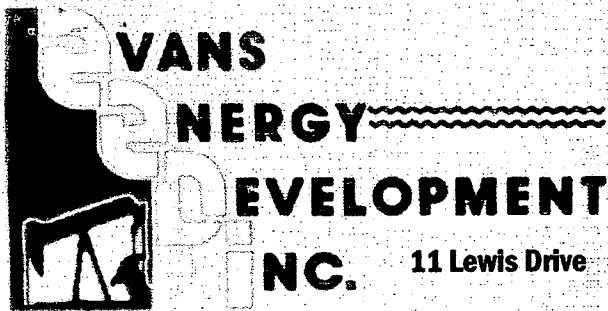
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	699' - 709' (21 perms)	N/A	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumerd Production, SWD or Enhr.					Producing Method		
n/a					<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		
	n/a	0	0				

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
 (If vented, Submit ACO-18.) Other (Specify) _____

METHOD OF COMPLETION Production Interval



**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

Tailwater, Inc.

Kempnich #10-IW

API #15-003-24,637

November 7 - November 10, 2008

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
13	soil & clay	13
98	shale	111
27	lime	138
70	shale	208
9	lime	217
6	shale	223
30	lime	253
7	shale	260
25	lime	285
7	shale	292
19	lime	311 base of the Kansas City
167	shale	478
6	lime	484
12	shale	496
8	lime	504
7	shale	511
2	lime	513
16	shale	529
3	grey sand	532 no oil show
11	oil sand	543
2	broken sand	545 good bleeding, 3% bleeding sand
5	silty shale	550
6	shale	556
9	lime	565
14	shale	579
3	lime	582
20	shale	602
11	lime	613
18	shale	631
4	lime	635
8	shale	643
7	lime	650
8	shale	658
1	oil sand	659
4	broken sand	663 good bleeding, 30% bleeding sand
2	silty shale	665

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19	shale	684
1	lime & shells	685
11	shale	696
1	lime & shells	697
3	grey sand	700
6	oil sand	706
3	broken sand	709 20% bleeding sand
3	silty shale	712
53	shale	765 TD

Drilled a 9 7/8" hole to 25'

Drilled a 5 5/8" hole to 765'

Set 25.2' of 7" casing cemented with 6 sacks of cement.

Set 755.5' of used threaded and coupled 8 round upset tubing including 3 centralizers, 1 float shoe and 1 clamp



CONSOLIDATED
Oilwell Services, LLC

TICKET NUMBER 19847
LOCATION Ottawa
FOREMAN Alan Maden

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-12-08	780C	Kempnich 10-TW	22	20	20	AN
STOMER			TRUCK #			
Oil water			DRIVER			
BILLING ADDRESS			TRUCK #			
421 Avondale Ste 212			DRIVER			
CITY			TRUCK #			
Klahoma City			DRIVER			
STATE			TRUCK #			
OK			DRIVER			
ZIP CODE			TRUCK #			
73116			DRIVER			
HOLE TYPE			CASING SIZE & WEIGHT			
Long string			2 7/8			
HOLE SIZE			HOLE DEPTH			
3 5/8			765			
DRILL PIPE			TUBING			
755			OTHER			
SLURRY VOL			WATER gal/sk			
			CEMENT LEFT in CASING			
			yes			
DISPLACEMENT PSI			MIX PSI			
			RATE			
			4 bpm			

MARKS: Checked casing depth. Mixed & pumped 100# gel followed by 115 gal 50/50 pot, 5th gal seal, 570 salt, 20 gal 14# Pheno seal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI for 30 minute MFT. Set float, closed valves.

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
401	1	PUMP CHARGE		925.00
406	25	MILEAGE		91.25
402	755	casing footage		
407A	1/2 mi	tax mileage		157.50
502C	1 1/2	80 vac		150.00
KANSAS CORPORATION COMMISSION				
107A	29#	Pheno seal		33.25
110A	575#	gal seal		241.50
111	242#	salt		78.86
112B	293#	gel		43.81
1124	103.5x	50/50 pot		1004.25
4402	1	2 1/2 plug		23.00
				Sub
				2755.00
				6.30
				SALES TAX
				97.36
				ESTIMATED
				TOTAL
				2852.88

13737
e was here too
THORIZATION _____ TITLE _____ DATE _____
received Time Nov. 13. 2008 10:23AM No. 6823
227375