

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32461
Name: Tailwater, Inc.
Address: 6421 Avondale Dr. 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: none
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. _____
4/25/06 4/26/06 5/12/06
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 091-23077-00-00
County: Johnson
nw - nw - sw - sw Sec. 33 Twp. 14 S. R. 22 East West
1275 feet from (S) N (circle one) Line of Section
5115 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: SALA Well #: 16-T
Field Name: Gardner
Producing Formation: Bartlesville
Elevation: Ground: n/a Kelly Bushing: n/a
Total Depth: 925' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from surface
feet depth to 20' w/ 4 sx cmt.
AH 2-D/G - 11/4/08

Drilling Fluid Management Plan
(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: _____
Title: CEO Date: 5/22/06
Subscribed and sworn to before me this 22 day of May
20 06.
Notary Public: Emily Marang
Date Commission Expires: 08/05/09



KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied. Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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Operator Name: Tailwater, Inc. Lease Name: SALA Well #: 16-T
 Sec. 33 Twp. 14 S. R. 22 East West County: Johnson

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Attached: Drillres Log & Gama Ray/Neutron

List All E. Logs Run:

Gama Ray/Neutron/CCL

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"		20 ft.	portland	4	
completion	5 5/8"	2 7/8"		914 ft.	portland	144	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	837'-847'	100 gal. 15% HCL	
		FRACS. 40SACKS 12-20	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 7/8"	909'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
5/13/06		<input type="checkbox"/> Flowing <input checked="" 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
	15	0		0	23

Disposition of Gas **METHOD OF COMPLETION** Production Interval

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



**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.
Sala #16T
API# 15-091-23,077
April 25 - April 26, 2006

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
8	soil & clay	8
23	lime	31
8	shale	39
10	lime	49
8	shale	57
20	lime	77
16	shale	93
25	lime	118
31	shale	149
8	lime	157
34	shale	191
7	lime	198
4	shale	202
9	lime	211
23	shale	234
5	lime	239
3	shale	242
9	lime	251
47	shale	298
25	lime	323
8	shale	331
22	lime	353
4	shale	357
17	lime	374
174	shale	548 Base of the Kansas City
4	lime	552
2	shale	554
3	lime	557
9	shale	566
8	lime	574
16	shale	590
3	lime	593
9	shale	602
3	lime	605
5	shale	610
4	lime	614
95	shale	709

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Sala 16T

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8	lime & shells	717
4	sand & broken sand	720
41	shale	762
2	lime	764
73	shale	837 brown, bleeding
1.2	limey sand	838.2 bleeding well
2.8	broken sand	841 80% white sand, 20% bleeding sand
7	sand	848 bleeding well
3	broken sand	851 broken sand, sandy shale, no bleeding
74	shale	925 TD

Drilled a 9 7/8" hole to 20'.
Drilled a 5 5/8" hole to 925'.

Set 20' of used 7" threaded and coupled surface casing, cemented with 4 sacks cement.

Set 914.15' of used 2 7/8" 8 round upset tubing including, 3 centralizers, 1 float shoe,
and 1 clamp.

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CONSOLIDATED OIL WELL SERVICES, INC.
211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 4206
LOCATION Ottawa
FOREMAN Alan Made

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-27-06	7806	Sala #16	33	15	22	50
CUSTOMER <u>Tailwater Inc</u>			TRUCK #			
MAILING ADDRESS <u>6421 Avondale Dr Ste 212</u>			DRIVER			
CITY <u>Oklahoma City</u>		STATE <u>OK</u>	ZIP CODE <u>73116</u>		TRUCK #	
			DRIVER			

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 925 CASING SIZE & WEIGHT 2 1/2
 CASING DEPTH 918' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/ok _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 5.3 DISPLACEMENT PSI 800 MIX PSI _____ RATE 4 bpm

REMARKS: Established rate. Mixed & pumped 200 lbs gel followed by 10 gal water to condition hole. Mixed & pumped 1775x 50/150 po2 2% gel. Circulated cement to surface. Flushed pump clean. Pumped 2 1/2 rubber plug to TD of casing. Well held 800 PSI for 30 min MIT.

Plug down 3:10 PM
Closed valve 3:40 PM

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	800.00
5406	30	MILEAGE		94.50
5402	918	casing footage		NC
5407	min	ten miles		275.00
5522C	2 1/2	80 var		225.00
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1118B	494 lb	premium gel		69.16
1124	144	50/150 po2		1274.40
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4402	1	2 1/2 rubber plug		18.00
				Sub
				2756.06
				After 2% discount
				2700.94
				less 2% for well #15 = 59.09
				2641.85
				6.490
				SALES TAX
				87.14
				ESTIMATED TOTAL
				2728.99

AUTHORIZATION _____ TITLE W# 205057 DATE _____
 2843.20