

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
Tailwater, Inc.
Name: _____
Address: 6421 Avondale, Ste 212
City/State/Zip: Oklahoma City, OK 783116
Purchaser: Pacer Energy
Operator Contact Person: Christian L. Martin
Phone: (405) 810-0900
Contractor: Name: EVANS Energy Development
License: 8509
Wellsite Geologist: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

11/23/09	11/24/09	12/10/09
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 091-23384-0000
County: Anderson JOHNSON
SE SW NE SW Sec. 33 Twp. 14 S. R. 22 East West
1525 1552 feet from S / N (circle one) Line of Section
3480 feet from E / W (circle one) Line of Section
Footages Calculated from NE Nearest Outside Section Corner:
(circle one) NE SE NW SW
Sala Well #: 23-T
Lease Name: _____

Field Name: _____
Producing Formation: Bartlesville
Elevation: Ground: 1009 est Kelly Bushing: n/a
Total Depth: 890' Plug Back Total Depth: 890'
Amount of Surface Pipe Set and Cemented at 22.7 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 22.7' w/ 6 sx cmt.

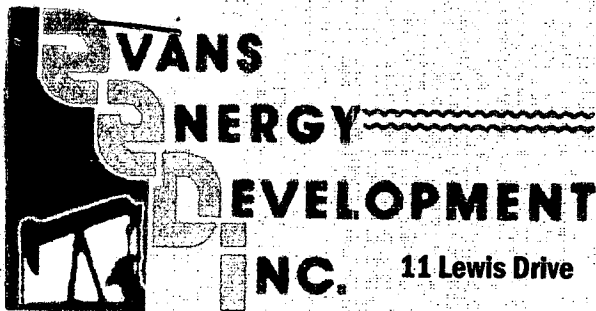
Drilling Fluid Management Plan AIA II NR 2-25-10
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ 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: Christian L. Martin
Agent
Date: 2-17-10
Subscribed and sworn to before me this 17 day of Feb
Notary: Rob Teters
Date Commission Expires: 9-1-2013

KCC Office Use ONLY
 Letter of Confidentiality Received
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
FEB 22 2010
KCC WICHITA



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 #23-T
API 15-091-23,384
November 23 - November 24, 2009

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
13	soil & clay	13
19	lime	32
9	shale	41
8	lime	49
9	shale	58
18	lime	76
16	shale	92
4	sand	96
5	lime	101
3	shale	104
14	lime	118
34	shale	152
7	lime	159
27	shale	186
9	lime	195
10	shale	205
7	lime	212
21	shale	233
6	lime	239
3	shale	242
10	lime	252
46	shale	298
27	lime	325
8	shale	333
21	lime	354 base of the Kansas City
177	shale	531
2	lime	533
2	shale	535
7	lime	542
9	shale	551
9	lime	560
10	shale	570
10	lime	580
15	shale	595
5	lime	600
15	shale	615
3	lime	618
31	shale	649

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5	lime	654
63	shale	717
1	silty shale	718
4	sand	722 brown, light oil show
5	silty shale	727
18	shale	745
5	lime	750
24	shale	774
6	lime	780
32	shale	812
3	lime	815
18	shale	833
2	lime	835
3	shale	838
2	broken sand	840 good bleeding
12	oil sand	852
38	shale	890 TD

Drilled a 8 5/8" Hole to 23'.

Drilled a 5 5/8" Hole to 890'

Set 22.7' of 7" surface casing cemented with 6 sacks of cement.

Set 874' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp.

RECEIVED

FEB 22 2010

KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 22470
LOCATION 247 Ave
FOREMAN Alan Mader

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-25-09	7804	Sala 23-T	SW 33	14	22	TO
CUSTOMER Tail Water						
MAILING ADDRESS 6421 Arrowdale Dr			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Oklahoma City			316	Alan M		
STATE OK			368	Ken H		
ZIP CODE 73116			369	Chuck L		
			512	Jason H		

JOB TYPE long string HOLE SIZE 6" HOLE DEPTH 890 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 875 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 5 bbl DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Checked casing depth. Mixed & pumped 100# gel to flush hole followed by 127 sk 50/50 po2, 2 1/2 gel. Circulated cement. Flushed pump. Pumped plug to casing TD. well held 800 PSI. Set float. closed valve.

Erans Energy

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		870.00
5106	25	MILEAGE		86.25
5402	875'	casing footage		
5707A	133.34	Ton miles		154.67
5502C	2 hr	80 vac		188.00
111813	313#	gel		50.08
1124	127 sk	50/50 po2	RECEIVED	1147.00
4402	1	2 1/2 plug	FEB 22 2010	22.00
		WO # 232172	KCC WICHITA	
		6.4%	SALES TAX	78.03
			ESTIMATED TOTAL	2596.03

Ravin 3737

AUTHORIZATION Dan was here

TITLE _____

DATE _____