

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 73116
Purchaser: Pacer Energy
Operator Contact Person: Christian L. Martin
Phone: (405) 810-0900
Contractor: Name: Evans Energy
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. _____
11/4/09 11/5/09 11/24/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 003-24734 - 0000
County: Anderson
nw nw ne se Sec. 21 Twp. 20 S. R. 20 East West
2475 feet from N (circle one) Line of Section
1155 feet from W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Finkenbinder Well #: 7-T
Lease Name: Garnett Shoestring
Field Name: Bartlesville
Producing Formation: _____
Elevation: Ground: 998 Kelly Bushing: _____
Total Depth: 760' Plug Back Total Depth: 760'
Amount of Surface Pipe Set and Cemented at 22.9' 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 22.9' w/ 6 sx cmt.

Drilling Fluid Management Plan Alt II ncr 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.

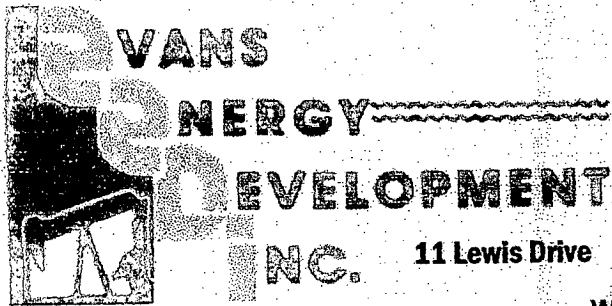
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Christian L. Martin
Title: Notary Date: 2-17-10
Subscribed and sworn to before me this 17 day of Feb
01014557
EXP. 09/01/13
STATE OF OKLAHOMA
Date Commission Expires: 9-1-2013

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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

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

11 Lewis Drive Paola, KS 66071

WELL LOG
Tailwater, Inc.
Finkenbinder #7-T
API #15-003-24,734
November 4 - November 5, 2009

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
10	soil & clay	10
132	shale	142
24	lime	166
68	shale	234
10	lime	244
6	shale	250
33	lime	283
4	shale	287
21	lime	308
15	shale	323
13	lime	336 base of the Kansas City
166	shale	502
10	lime	512
3	shale	515
11	lime	526
16	shale	542
6	broken sand	548
7	silty shale	555
15	broken sand	570 good bleeding
5	silty shale	575
8	shale	583
4	lime	587
3	shale	590
2	lime	592
7	shale	599
6	lime	605
25	shale	630
12	lime	642
12	shale	654
5	lime	659
8	shale	667
4	lime	671
12	shale	683
1	broken sand	684 good bleeding
1	oil sand	685
3	broken sand	688 good bleeding
12	silty shale	700
19	shale	719

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4	grey sand	723
1	broken sand	724 light oil show
6	grey sand	730
10	silty shale	740
20	shale	760 TD

Drilled a 8 5/8" hole to 23'

Drilled a 5 5/8" hole to 760'.

Set 22.9' of 7" surface casing cemented with 6 bags of cement.

Set 736.7' of 2 7/8" threaded and coupled 8 round upset tubing using 3 centralizers, 1 float shoe & 1 clamp.

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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 22455
LOCATION Ottawa KS
FOREMAN Fred Maden

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/06/09	7806	Finkenbinder # 7-T	SE 21	20	20	AN
CUSTOMER Tailwater Inc						
MAILING ADDRESS 6421 Avondale Dr Ste 212						
CITY Oklahoma City		STATE OK	ZIP CODE 73116			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			506	Fred		
			495	Casey		
			369	Chuck		
			510	Jason		

JOB TYPE Longstring HOLE SIZE 6" HOLE DEPTH 760 CASING SIZE & WEIGHT 2 7/8" EUE
CASING DEPTH 737' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
DISPLACEMENT 4.3 BB' DISPLACEMENT PSI _____ MIX PSI _____ RATE 58PM

REMARKS: Check casing depth w/wireline. Mix Pump 200# Premium Gel
Flush. Mix Pump 120 SKS 50/50 Por Mix Cement 2% Gel
Cement to surface. Flush pump + lines clean. Displace
2 1/2" Rubber plug to casing TD w/ 4.3 BBL Fresh Water
Pressure to 800# PSI. Hold pressure for 30 min MIT.
Release pressure to set Float Valve. Shut in casing.

Evans Energy Dev. Inc. Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		870 ⁰⁰
5406	25 mi	MILEAGE Pump Truck		86 ²⁵
5402	737'	Casing footage		N/C
5407A	126	Ten miles		246 ¹⁶
5502c	2 hrs	80 BBL Vac Truck		188 ⁰⁰
1124	118 SKS	50/50 Por Mix Cement		1091 ⁵⁰
1118B	402#	Premium Gel		643 ²²
4402	1	2 1/2" Rubber Plug		22 ⁰⁰
<u>NO 231891</u>				
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			6.3%	SALES TAX
				80.09
				ESTIMATED TOTAL
				2548.35

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____