

Correction #1

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONFIDENTIAL

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, 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
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. _____

<u>4/29/08</u>	<u>4/30/08</u>	<u>6/24/08</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 003-24511-00-00

County: Anderson

Sec. 22 Twp. 20 S. R. 20 East West

4245 feet from (S) N (circle one) Line of Section

4839 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW
Lease Name: Kempnich Well #: 5-T

Field Name: Garnett Shoestring

Producing Formation: Bartlesville

Elevation: Ground: 965 Kelly Bushing: _____

Total Depth: 750' Plug Back Total Depth: n/a

Amount of Surface Pipe Set and Cemented at 20.6 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 20.6' w/ 6 sx cmt.

Drilling Fluid Management Plan AII II NUR 5-19-10
(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

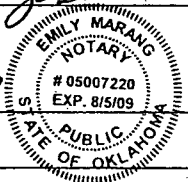
Title: Agent Date: 8/15/08

Subscribed and sworn to before me this 15 day of August

20 08

Notary Public: Emily Marang

Date Commission Expires: 08/15/09



KCC Office Use ONLY

N Letter of Confidentiality Received

If Denied, Yes Date: _____

____ Wireline Log Received

____ Geologist Report Received

____ UIC Distribution

RECEIVED

MAR 01 2010

KCC WICHITA

Operator Name: Tailwater, Inc. Lease Name: Kempnich Well #: 5-T
 Sec. 22 Twp. 20 S. R. 20 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"		20.6'	Portland	6	
Completion	5 5/8"	2 7/8"		740.2'	Portland	113	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 <i>(Amount and Kind of Material Used)</i>	
			Depth
2	645' - 650' (11 perfs)	Acid spot 15% HCL 100 gal.	
2	681.5' - 691.5' (21 perfs)	60 sx sand - 190 bbls H2O	

TUBING RECORD	Size <u>2 7/8"</u>	Set At <u>740.2'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. <u>6/24/08</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. <u>10</u>	Gas Mcf <u>0</u>	Water Bbls. <u>none</u>	Gas-Oil Ratio <u>n/a</u>	Gravity
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Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION

Production Interval Open Hole Perf. Dually Comp. Commingled Other (Specify) _____