

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, Ste. 212  
Oklahoma City, OK 73116  
City/State/Zip: CMT  
Purchaser: Christian L. Martin  
Operator Contact Person: 405 810-0900  
Phone: Evans Energy Development, Inc.  
Contractor: Name: 8509  
License: 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. \_\_\_\_\_

5/19/08 5/20/08 6/30/08  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 003-24536-00-00  
County: Anderson NESWSE  
SE NW SW NW Sec. 22 Twp. 20 S. R. 20 ☒ East ☐ West  
2977 feet from (S) N (circle one) Line of Section  
4832 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 #: 16-T  
Field Name: Garnett Shoestring  
Producing Formation: Bartlesville  
Elevation: Ground: 982 Kelly Bushing: n/a  
Total Depth: 728' Plug Back Total Depth: n/a  
Amount of Surface Pipe Set and Cemented at 20.2 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 20.2' w/ 5 sx cmt.

Drilling Fluid Management Plan Air II NR 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: Stacy B. 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: 08/05/2009



KCC Office Use ONLY	
<u>N</u>	Letter of Confidentiality Received
	If Denied, Yes <input type="checkbox"/> Date: _____
<input type="checkbox"/>	Wireline Log Received
<input type="checkbox"/>	Geologist Report Received
<input type="checkbox"/>	UIC Distribution
<b>RECEIVED</b> <b>MAR 01 2010</b>	

KCC WICHITA

Operator Name: Tailwater, Inc. Lease Name: Kempnich Well #: 16-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 ☐ Yes ☒ No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No  
 (Submit Copy)

List All E. Logs Run:

**Gamma Ray/Neutron**

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name Top Datum

**Bartlesville**  
**Driller's Log Attached**

**CASING RECORD** ☐ New ☐ 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"		20.2'	Portland	5	
Completion	5 5/8"	2 7/8"		762'	Portland	112	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	664' - 670' (13 perfs)	Acid spot 15% HCL 100 gal.	
2	702' - 712' (21 perfs)	60 sx sand - 170 bbls H2O	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8"	762'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.	Producing Method			
6/30/08	<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
	10	0	none	n/a

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease  
 (If vented, Submit ACO-18.)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled  
☐ Other (Specify) \_\_\_\_\_