

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32461
Name: Tailwater, Inc.
Address 1: 6421 Avondale Dr., Ste. 212
Address 2: _____
City: OKC State: OK Zip: 73116 + _____
Contact Person: Christian L. Martin
Phone: (405) 810-0900
CONTRACTOR: License # 8509
Name: Evans Energy Development Inc.
Wellsite Geologist: n/a
Purchaser: Pacer Energy

Designate Type of Completion:

- New Well Re-Entry Workover
 Oil WSW SWD SLOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., 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 Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

7/29/10 8/3/10 8/31/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 003-24855-0000

Spot Description: _____
nw se nw sw Sec. 15 Twp. 20 S. R. 20 East West
1875 1777 Feet from North / South Line of Section
825 4548 Feet from East / West Line of Section
GPS-KCC-DLG

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Anderson

Lease Name: West Wittman Well #: 3-T

Field Name: Garnett Shoestring

Producing Formation: Squirrel

Elevation: Ground: 972 est Kelly Bushing: n/a

Total Depth: 778' Plug Back Total Depth: n/a

Amount of Surface Pipe Set and Cemented at: 21 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: 21' w/ 6 sx cmt.

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 #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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.

AFFIDAVIT

I am the affiant and I hereby certify that 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: Officer Mgr Date: 3-2-11

KCC Office Use ONLY

Letter of Confidentiality Received

Date: _____ RECEIVED
MAR 07 2011

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: DG Date: 3/1/11
KCC WICHITA

Operator Name: Tailwater, Inc. Lease Name: West Wittman Well #: 3-T
 Sec. 15 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 complete copy of all Electric Wire-line 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Squirrel 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"		21'	Portland	6	
completion	5 5/8"	2 7/8"		749.3'	Portland	101	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	663 - 675' (26 perms)	75 gal. 15% HCL	
		30 sx sand - 130 bbl H2O	

TUBING RECORD: Size: 2 7/8" Set At: 749.3' Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. 8/31/10	Producing Method: <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. 10 Gas Mcf 0 Water Bbls. n/a Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: RECEIVED MAR 07 2011
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**VANS
ENERGY
DEVELOPMENT
NC.**

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.
West Wittman #3-T
API# 15-003-24,855
July 29 - August 3, 2010

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
12	soil & clay	12
81	shale	93
30	lime	123
19	shale	142
9	lime	151
34	shale	185
3	lime	188
2	shale	190
5	lime	195
14	shale	209
26	lime	235
7	shale	242
20	lime	262
2	shale	264
1	lime	265
4	shale	269
18	lime	287 base of the Kansas City
168	shale	455
3	lime	458
4	shale	462
11	lime	473 oil show
13	shale	486
9	sand	495 green, no oil
1	coal	496
8	shale	504
14	sand	518 green, lite oil show
8	shale	526
12	lime	538 with a few shale seams
11	shale	549
3	lime	552
20	shale	572
7	lime	579
23	shale	602
4	lime	606
6	shale	612
4	lime	616
48	shale	664

RECEIVED

MAR 07 2011

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13	oil sand	677	lite brown, ok bleeding
7	oil sand	684	black, little bleeding
32	shale	716	
62	sand	778	water sand
		778	TD

Drilled a 9 7/8" hole to 20.4'
Drilled a 5 5/8" hole to 778'

Set 21' of 7" surface casing with 6 sacks of cement.

Set 749.3' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 float shoe and 1 clamp.

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MAR 07 2019
KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27052
LOCATION Ottawa
FOREMAN Alan 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
8-7-10	7806	W.W. Hman 3-T	SW 15	20	20	AN
CUSTOMER Tail water						
MAILING ADDRESS 6421 Arundale Dr Ste 212			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Oklahoma City			516	Alan M	516	Safety Meeting
STATE OK			1104	Arden M	1104	Arden
ZIP CODE 73116			370	Derek M	370	Derek
			548	Timew	548	Timew

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 758 CASING SIZE & WEIGHT 2 1/8
CASING DEPTH 750' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT _____ DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Hold crew meeting. Mixed & pumped 100# gel to flush hole. Mixed & pumped 10.3 sk 50/50 po2, 20 gal. circulated cement. Flushed pump. Pumped plug to casing TD. Well hold 800 psi. Set float closed valve.

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		225.00
5406	25	MILEAGE		91.25
5402	750	casing footage		
5407	1/2 min	ton miles		157.50
5502C	1 1/2	80 val		150.00
1118B	273 #	gel		54.60
1124	101 sk	50/50 po2		993.84
4402	1	2 1/2 plug		23.00
				RECEIVED
				MAR 17 2011
				KCC WICHITA
				NO 235686
				SALES TAX ESTIMATED
				TOTAL 83.57
				2478.76

RAVIN 3737
AUTHORIZATION [Signature] TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.