

Kansas Corporation Commission Oil & Gas Conservation Division 1065346

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	API No. 15
Name: Tailwater, Inc.	Spot Description:
Address 1: 6421 AVONDALE DR STE 212	NE_SE_SW_SW_Sec15_Twp20_S. R20_ 🗹 East 🗌 West
Address 2:	4785 Feet from V North / South Line of Section
City: OKLAHOMA CITY State: OK Zip: 73116 + 6428	1155 Feet from East / West Line of Section
Contact Person: Chris Martin	Footages Calculated from Nearest Outside Section Corner:
Phone: (405) 810-0900	□NE ☑NW □SE □SW
CONTRACTOR: License #_8509	County: Anderson
Name: Evans Energy Development, Inc.	Lease Name:East Wittman Well #:11-T
Wellsite Geologist: n/a	Field Name: Garnett Shoestring
Purchaser: Pacer Energy	Producing Formation: Squirrel
Designate Type of Completion:	Elevation: Ground: 963 Kelly Bushing: 0
✓ New Well Re-Entry Workover	Total Depth: 701 Plug Back Total Depth: 0
☑ Oil	Amount of Surface Pipe Set and Cemented at: 22 Feet
☐ Gas ☐ D&A ☐ ENHR ☐ SIGW	Multiple Stage Cementing Collar Used?
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to: 22 w/ 4 sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Dalling Physical State and annual Physics
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: 0 ppm Fluid volume: 0 bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD	
Conv. to GSW	Dewatering method used:Evaporated
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	QuarterSecTwpS. R East West
ENHR Permit #:	
GSW Permit #:	County: Permit #:
08/23/2011 08/24/2011 09/14/2011	
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date	

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.

Submitted Electronically

KCC Office Use ONLY
Letter of Confidentiality Received
Date:
Confidential Release Date:
☑ Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I I III Approved by: Deanna Garrison Date: 10/14/2011

Side Two



Operator Name: Tailwater, Inc.		Lease I	Name: _	East Wittman		Well #:11	-1	
Sec. 15 Twp. 20 S. R. 20	✓ East ☐ West	County	Ande	rson		· · ·		
INSTRUCTIONS: Show important tops a time tool open and closed, flowing and sh recovery, and flow rates if gas to surface the line Logs surveyed. Attach final geological	ut-in pressures, whether est, along with final char	shut-in press	sure read	ched static level,	hydrostatic pre	ssures, bottom	hole temperature, fluid	
Drill Stem Tests Taken			✓ Log Formation (Top), Dep			th and Datum Samp		
Samples Sent to Geological Survey	☐ Yes 🗸 No		Name 274			Top Datum lime base of K		
Cores Taken Electric Log Run Electric Log Submitted Electronically (If no, Submit Copy)			487 494 500 508			sand sand oil sand sand	white, no oi grey, no oil green, light bleeding	
List All E. Logs Run:		,	659			oil sand	grey, no oil brown, ok bleeding	
Gamma Ray/Neutron								
		G RECORD	✓ Ne					
Purpose of String Size Hole Orilled	Report all strings set Size Casing Set (In O.D.)	Weig	ght	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
surface 9.8750	7	17		22	Portland	4		
completion 5.6250	2.8750	6.45		691	Portland	91	50/50 POZ	
	ADDITION	L OFMENTIN						
Purpose: Depth Top Bottom	Type of Cement		# Sacks Used Type and Percent Additives				S	
Protect Casing Plug Back TD Plug Off Zone -								
	TION RECORD - Bridge Plu Footage of Each Interval Pe				cture, Shot, Ceme nount and Kind of I	ent Squeeze Reco Material Used)	rd Depth	
	 		_,· · · · .			 		
	· · · · · · · · · · · · · · · · · · ·							
TUBING RECORD: Size:	Set At:	Packer A	t:	Liner Run:	Yes N	lo	I	
Date of First, Resumed Production, SWD or E	NHR. Producing Me	ethod:	g 🗌	Gas Lift C	Other (Explain)			
Estimated Production Oil Per 24 Hours	Bbls. Gas	Mcf	Wat	er , B	bls.	Gas-Oil Ratio	Gravity	
DISPOSITION OF GAS:		METHOD OF	COMPLE	ETION:		PRODUČTI	ON INTERVAL: '	
Vented Sold Used on Lease	Open Hole	Perf.	Dually (Submit		nmingled mit ACO-4)			



LOCATION Offaug

FOREMAN Alga Made

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

FIELD TICKET & TREATMENT REPORT

,				CENE	41			
DATE	CUSTOMER#		NAME & NUM	IBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-24.11	7806	F.W.T	t man	11.7	SW 15	20	20	ANI
CUSTOMER	J			,	1000	aviate management and the later of	MAIN SERVE STREET	<i>11.</i>
Tailu	ater				TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	SS			7	516	41	CAF	Meet
6421 Au	ondale	Ste	212		3/08	Mann	argu e	Y JVIEE
CITY		STATE	ZIP CODE	+	03	1750 (7	MAA	
A42101		f '.	73116		310	Mrlen/1/2	14/1//	
UKlahan		OK	1		548	Tim L	アム	*-
JOB TYPE DY	35 570 mg	HOLE SIZE	57/8	HOLE DEPT	H 701	CASING SIZE & V	VEIGHT 23/	3
CASING DEPTH	691	DRILL PIPE		_TUBING			OTHER	
SLURRY WEIGH	T	SLURRY VOL_		WATER gal/	sk	CEMENT LEFT In	-	
DISPLACEMENT	<u> </u>	DISPLACEMENT	T PSI	MIX PSI		RATE		
REMARKS:	eld cre	w no		Mix	ca La	" Deal In	O# and	*~
flugh	hole.	Followe	7 17	91	K 10/57	202 10	lus 20	71) 71
	ated .	PMP4 X		shed	Pump.	Ruped	000	K-X-2011
1 acin	· TD	Weil	held	INN O	ST CO	J Flood	7195	Lucien
			<u> </u>		01. 08	7 1007	1/050	COURC
Fraus	Energy	Irac	110					
	7			· · · · · · · · · · · · · · · · · · ·		مريالي المراجعين الم		
		***************************************	······································			A	0-1	Aala-
							ran /	word
ACCOUNT			Y					

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE 368		975.00
5406		MILEAGE 368		7.0.00
3402	<u> </u>	casing toptage 368		
5407	- 1/2 min	tonniles 548		165.00
5502	1 1/8	80 144		13320
1124	91	30150 POZ		950,95
111813	253	34.1		960
4402		21/2 Plus		28.00
		743/31		
avin 3737			SALES TAX	8023
UTHORIZTION	st. Q		COTHIATCO	2384.8

I asknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the sustamer'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.