



KANSAS CORPORATION COMMISSION 1065182
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: OKLAHOMA CITY State: OK Zip: 73116 + 6428
Contact Person: Chris 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 SIOW
 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 #: _____

| | | |
|-----------------------------------|-------------------|---|
| <u>10/03/2011</u> | <u>10/04/2011</u> | <u>10/12/2011</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-003-25052-00-00
Spot Description: _____
NE SE SW SE Sec. 13 Twp. 20 S. R. 20 East West
550 Feet from North / South Line of Section
1511 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: EAST HASTERT Well #: 37-E
Field Name: Garnett Shoestring
Producing Formation: Bartlesville
Elevation: Ground: 1046 Kelly Bushing: 0
Total Depth: 855 Plug Back Total Depth: 0
Amount of Surface Pipe Set and Cemented at: 25 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: 25 w/ 5 sx cmf.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bbls
Dewatering method used: Evaporated
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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 II III Approved by: Deanna Gantzer Date: 10/31/2011



1065182

Operator Name: Tailwater, Inc. Lease Name: EAST HASTERT Well #: 37-E
 Sec. 13 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gammay Ray/ Neutron | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Datum</th> </tr> <tr> <td>317</td> <td>lime</td> <td>base of KC</td> </tr> <tr> <td>483</td> <td>shale</td> <td>oil show</td> </tr> <tr> <td>772</td> <td>oil sand</td> <td>brown, like bleeding</td> </tr> <tr> <td>788</td> <td>oil sand</td> <td>black, good bleeding</td> </tr> </table> | Name | Top | Datum | 317 | lime | base of KC | 483 | shale | oil show | 772 | oil sand | brown, like bleeding | 788 | oil sand | black, good bleeding |
|---|--|----------------------|-----|-------|-----|------|------------|-----|-------|----------|-----|----------|----------------------|-----|----------|----------------------|
| Name | Top | Datum | | | | | | | | | | | | | | |
| 317 | lime | base of KC | | | | | | | | | | | | | | |
| 483 | shale | oil show | | | | | | | | | | | | | | |
| 772 | oil sand | brown, like bleeding | | | | | | | | | | | | | | |
| 788 | oil sand | black, good bleeding | | | | | | | | | | | | | | |

| CASING RECORD <input checked="" 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 | 9.8750 | 7 | 17 | 25 | Portland | 5 | |
| completion | 5.6250 | 2.8750 | 6.45 | 844.7 | Portland | 113 | 50/50 POZ |
| | | | | | | | |

| ADDITIONAL CEMENTING / SQUEEZE RECORD | | | | |
|---------------------------------------|------------------|----------------|--------------|----------------------------|
| Purpose: | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
| — Perforate | | | | |
| — Protect Casing | - | | | |
| — Plug Back TD | - | | | |
| — 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 |
|----------------|---|--|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | | | |
|---|-----------|--|-----------------------------------|
| TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ | | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Date of First, Resumed Production, SWD or ENHR. _____ | | Producing Method: <input type="checkbox"/> Flowing <input 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 |

| | | |
|---|---|--|
| 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> <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: _____ _____ |
|---|---|--|



CONSOLIDATED
Oil Well Services, LLC

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

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 32623
LOCATION Ottawa, KS
FOREMAN Casey Kennedy

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|--|------------|--------------------|---------|----------|---------|--------|
| 10/4/11 | 7806 | Hastert # 37 | NE 24 | 20 | 20 | AN |
| CUSTOMER Fastwater Inc. | | | TRUCK # | | | |
| MAILING ADDRESS 6421 Avondale Dr, Suite 212 | | | DRIVER | | TRUCK # | |
| CITY Oklahoma City | | | DRIVER | | TRUCK # | |
| STATE OK | | | DRIVER | | TRUCK # | |
| ZIP CODE 73116 | | | DRIVER | | TRUCK # | |

JOB TYPE longstring HOLE SIZE 5 1/2" HOLE DEPTH 865' CASING SIZE & WEIGHT 2 7/8" EGS
 CASING DEPTH 855' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" rubber plug
 DISPLACEMENT 4.97 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 5.5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 1600# Premium Gel followed by 10 bbls fresh water, mixed & pumped 113 stks 50/50 Formix cement w/ 2% gel per sk, cement to surface, flushed pump clean, displaced 2 1/2" rubber plug to casing 750' / 4.82 bbls fresh water, pressured to 800 PSI, released pressure to set float valve, shot in casing.

[Handwritten signature]

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|-----------------------------|-------------------|------------------------------------|------------|----------|
| 5401 5401 | 1 | PUMP CHARGE cement pump | 485 | 975.00 |
| 5406 | on lease | MILEAGE pump truck | 485 | --- |
| 5402 | 855' | Casing footage | --- | --- |
| 5407 | 1/2 minimum | ton mileage | 548 | 112.5.00 |
| 5502C | 2 hrs | 80 bbl Wac Truck | 370 | 180.00 |
| 1124 | 113 stks | 50/50 Formix. cement | --- | 1180.85 |
| 1118B | 290 # | Premium Gel | --- | 58.00 |
| 4402 | 1 | 2 1/2" rubber plug | --- | 28.00 |
| <i>[Handwritten: 24712]</i> | | | | |
| SALES TAX | | | | 98.81 |
| ESTIMATED TOTAL | | | | 2685.66 |

Rev'n 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.