



KANSAS CORPORATION COMMISSION 1065561
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 #:

10/10/2011	10/12/2011	10/13/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25202-00-00
Spot Description:
SE NW SE NE Sec. 16 Twp. 20 S. R. 20 East West
3465 Feet from North / South Line of Section
825 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: TETER Well #: 1-T
Field Name: Garnett Shoestring
Producing Formation: Bartlesville
Elevation: Ground: 1005 Kelly Bushing: 0
Total Depth: 821 Plug Back Total Depth: 0
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: 811
feet depth to: 0 w/ 107 sx cmt.

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 Gansior Date: 02/22/2012



1065561

Operator Name: Tailwater, Inc.

Lease Name: TETER

Well #: 1-T

Sec. 16 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name Attached	Top Attached	Datum Attached
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 <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

List All E. Logs Run:

Gamma Ray Neutron

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	21	Portland	4	
completion	5.6250	2.8750	6.45	811	Portland	107	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	752' - 765'	Acid spot 15% HCl 75 gal. 40 sx sand, 152 bbls H2O	

TUBING RECORD: Size: 2.8750 Set At: 811 Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. 12/08/2011 Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
5					

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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL:
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Form	ACO1 - Well Completion
Operator	Tailwater, Inc.
Well Name	TETER 1-T
Doc ID	1065561

Tops

391	sand	brown
549	lime	oil show
579	oil sand	green, ok bleeding
591	sand	green, wet, lite oil show
599	sand	grey, no oil
755.5	oil sand	brown & sand
763.5	broken sand	lite brown & grey sand, OK bleeding
774	limey sand	black sand, no oil



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 32950

LOCATION Ottawa KS

FOREMAN Fred Mad...

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/3/11	7806	Teter # 1 T	NE 16	28	20	AN

TRUCK #	DRIVER	TRUCK #	DRIVER
506	FREMAN	Safety	W&S
368	ARLMCO		
370	GAR.MOO	GM	
510	DERMAS	DM	

CUSTOMER Tailwater Inc
MAILING ADDRESS 6421 Avondale DR
CITY Oklahoma City STATE OK ZIP CODE 73116

JOB TYPE long string HOLE SIZE 5 7/8
CASING DEPTH 8110 DRILL PIPE
SLURRY WEIGHT SLURRY VOL
DISPLACEMENT 4.71 BA DISPLACEMENT PSI

HOLE DEPTH 821 CASING SIZE & WEIGHT 2 7/8 EUE
TUBING
WATER gal/sk
MIX PSI
CEMENT LEFT IN CASING 2 1/2" Plug
RATE 4 BPM

REMARKS: Establish pump rate. Mix & Pump 100^M Premium Gel Flush Mix Pump 105 sks 50/50 Por Mix Cement 2% Gel. Cement to surface. Flush pump & lines clean. Displace 2 1/2" Rubber plug to casing TD w/ 4.71 BBL fresh water. Pressure to 800^M PSI. Release pressure to Set Float Valve. Shut in casing.

Evans Energy Dev. Inc. (Travis)

Fred Mad...

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		
5406	25 mi	MILEAGE	368	975 ⁰⁰
5402	84	Casing footage	368	100 ⁰⁰
5407	1/2 Minimum	TON Miles	510	NIC
5402C	1 1/2 hrs	80 BBL Vac Truck	370	165 ⁰⁰
1124	107 SKS	50/50 Por Mix Cement		
1118B	280 ^M	Premium Gel		1118 ¹⁵
4402	1	2 1/2" Rubber Plug		56 ⁰⁰
				28 ⁰⁰

245073

Ravin 3737
AUTHORIZATION [Signature] TITLE _____ DATE _____
SALES TAX 7.87% ESTIMATED TOTAL 2670⁰²

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.