

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1074464

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 - 15-003-25038-00-00
Name: Tailwater, Inc.	Spot Description:
Address 1: 6421 AVONDALE DR STE 212	SE_NW_SW_Sec22Twp20S R20
Address 2:	
City: OKLAHOMA CITY State: OK Zip: 73116 + 6428	990 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: SOUTH KEMPNICH Well #: 15-IW
Wellsite Geologist: n/a	Field Name:
Purchaser: Pacer Energy	Producing Formation: Squiπel
Designate Type of Completion:	Elevation: Ground: 968 Kelly Bushing: 0
√ New Well	Total Depth: 728 Plug Back Total Depth:
☐ Oil ☐ wsw ☐ swp ☐ slow	Amount of Surface Pipe Set and Cemented at: 23 Feet
☐ Gas ☐ D&A ☑ ENHR ☐ SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from: 718
Cathodic Other (Core, Expl., etc.):	feet depth to: 0 w/ 98 sx cmt.
If Workover/Re-entry: Old Well Info as follows:	SX UIII.
Operator:	
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 #:	
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	QuarterSecTwpS. R East West
GSW Permit #:	County: Permit #:
10/28/2011 10/31/2011 11/02/2011	
Spud Date or 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 II Approved by: Oceans Gerisor Date: 02/22/	2012

Side Two



Operator Name: Tails	water, Inc.		Lease I	Name: 📑	SOUTH KEM	PNICH	Well #:15-	<u>-IW</u>	
Sec. 22 Twp.20	s. R. <u>20</u>	✓ East	County	Ande	rson				
time tool open and clos	sed, flowing and shu s if gas to surface te	nd base of formations po it-in pressures, whether est, along with final char well site report.	shut-in pres	sure read	ched static level,	hydrostatic pro	essures, bottom t	nole temp	erature, fluid
Drill Stem Tests Taken (Attach Additional S	heets)	☐ Yes 📝 No		√ Le		n (Top), Depth			Sample
Samples Sent to Geological Survey		Yes ✓ No	Yes 🗸 No		e ed		Top Datum Attached Attached		
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	•	Yes No Yes No Yes No		, , , ,	.		,		
List All E. Logs Run:									
		CACIA	IG RECORD	 ✓ Ne	w Used				
		Report all strings se				ion, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Wei Lbs.		Setting Depth	Type of Cement	# Sacks Used		and Percent dditives
surface	9.8750	7	17		23	Portland	5		
completion	5.6250	2.8750	6.45		718	Portland	98	50/50 F	POZ
								<u> </u>	
Purpose:	Depth Top Bottom	ADDITIONAL CEMENTIN Type of Cement # Sacks			Used Type and Percent Additives				
Perforate Protect Casing Plug Back TD Plug Off Zone	-								
Flug Oil 20119	-		i						
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Specify Footage of Each Interval Perfo						dement Squeeze Record d of Material Used) Depth		
						·	•		
TUBING RECORD:	Size: .8750	Set At: 718	Packer A	At:	Liner Run:	Yes 🗸	No		
Date of First, Resumed t	Production, SWD or EN	NHR. Producing M	lethod:	ng 🗌	Gas Lift 0	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Wat	er B	bis.	Gas-Oil Ratio	_	Gravity
DISPOSITIO	N OF CAP		METUODO	COMP	ETION:	· 1	DDODUCT	ON INTER	VA1 :
DISPOSITIO	_	Open Hole	METHOD OF Perf.	Dually	Comp. Cor	nmingled	PRODUCTI	ON INTER	VAL:
(If vented, Sub		Other (Specify)		(Submit		mit ACO-4)			

Form	ACO1 - Well Completion
Operator	Tailwater, Inc.
Well Name	SOUTH KEMPNICH 15-IW
Doc ID	1074464

Tops

296	lime	base of the KC		
491	lime	oil show		
511	oil sand	green, lite oil show		
533	oil sand	green, good bleeding		
652	broken sand	brown & green sand, ok bleeding		
655	oil sand	brown sand, ok bleeding		
658	broken oil sand	brown & green sand, ok bleeding		
689	shale	brown, good bleeding		
697	oil sand	H .		
706	sand	black, lite oil show		

C	CONS
	Cit ale

	Of West Services, LLC				LOCATION		75040
			LOCATION Ottawa FOREMAN Alan Mader				
PO Box 884, 6	Chanute, KS 66720 F or 800-467-8676	IELD TICK		TMENT REP	ORT ORT	Dian Ni	90 cr
DATE		ELL NAME & NU	CEMEN				
11-2-11	7806 3 Ke	CEL TAME & NO	+	SECTION	TOWNSHIP	RANGE	COUNTY
CUSTOMER	1 · De.	aprich	15 I-W	15W 22	20	20	An
MAILING ADDR	vater		11	TRUCK#	CONTRACT OF THE PROPERTY OF TH	A KARON BAR	TANK OF LOSS
6421 A	voudale Ste	2/2		516	A IQUA M	Gafet.	DRIVER
OKlaho		ZIP CODE	Ť	370	Gan M	AKIVI	+
JOB TYPE OF		35/8		510	KeithD	KD	
CASING DEPTH		<u> </u>	_ HOLE DEPTH	728	CASING SIZE &	WEIGHT	1/8
SLURRY WEIGI			TUBING		- <u>-</u>	OTHER	
DISPLACEMEN		ENT PSI_\$00	WATER gal/si		CEMENT LEFT IN	CASING	25
	Held crew me			1 7	RATE_5_b	em "	
	el to Luch	Asia	54961	shed 1	sure.	Mixad	& route
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Eva	ne Francisco						
	ns Entry, 1	ravis.	<u> </u>			Make	1
					Alem	1100	
ACCOUNT) Door		
CODE	QUANITY or UNITS	DE	SCRIPTION of S	SERVICES or PROI	DUCT	UNIT PRICE	TOTAL
5401		PUMP CHARG					
540kg		MILEAGE					975.00
5402	718	Caci	F. (+	92 Pd CE		<u> </u>	
5407	1/2 -4 -4	Tox	2/10 2	sa race		1	
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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.