



KANSAS CORPORATION COMMISSION 1075601
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 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 #: _____

<u>02/22/2012</u>	<u>02/23/2012</u>	<u>02/24/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25306-00-00

Spot Description:
W2 W2 NW SW Sec. 15 Twp. 20 S. R. 20 East West

1980 Feet from North / South Line of Section

165 Feet from East / West Line of Section

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

County: Anderson

Lease Name: West Wittman Well #: 13-IW

Field Name: Garnett Shoestring

Producing Formation: Bartlesville

Elevation: Ground: 967 Kelly Bushing: 0

Total Depth: 736 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: 726
feet depth to: 0 w/ 100 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 Garrison Date: 04/30/2012



1075601

Operator Name: Tailwater, Inc. Lease Name: West Wittman Well #: 13-IW
 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 <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	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	299	lime	base of the KC
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	489	lime	oil sho
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	511	oil sand	green, lite bleeding
List All E. Logs Run:		541	oil sand	green, good bleeding
		692	oil sand	brown, good bleeding
		701	oil sand	black, no oil show
		736	broken sand	brown & gray sand, lite

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	6	
completion	5.6250	2.8750	6.45	726	Portland	100	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
0			

TUBING RECORD: Size: <u>2.8750</u> Set At: <u>726</u> Packer At:		Liner Run: <input type="checkbox"/> Yes <input checked="" 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 <i>(Explain)</i>	
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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i>	PRODUCTION INTERVAL: _____ _____
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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 34188
LOCATION Ottawa
FOREMAN Alan Maden

DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
2-24-12	7806	W Wittman 13-1W		SW 15	20	20	AN
CUSTOMER Tail water				TRUCK #			
MAILING ADDRESS 6421 Avondale				DRIVER		TRUCK #	
CITY Oklahoma City, OK				DRIVER		TRUCK #	
STATE OK				DRIVER		TRUCK #	
ZIP CODE 73116				DRIVER		TRUCK #	
JOB TYPE	HOLE SIZE	HOLE DEPTH	CASING SIZE & WEIGHT	OTHER			
long string	5 5/8	736	2 7/8				
CASING DEPTH	DRILL PIPE	TUBING	CEMENT LEFT in CASING				
726			yes				
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	RATE				
			4 bpm				
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	REMARKS:				
4 1/4	800	200	held crew meet. Established rate. Mixed & pumped 100# gel followed by 100 sk 50/50 cement. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI for 30 minute NIT. Set float. Closed valve.				

Evans Energy, Trucks

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406	25	MILEAGE		100.00
5402	726	Casing footage		
5407	1/2 mi	ten miles		175.00
5502C	2	80 vac		180.00
1124	100	50/50 cement.		1095.00
118B	268 #	gel		56.28
4402	1	2 1/2 plug		28.00
<i>248028</i>				

SALES TAX 91.98
ESTIMATED TOTAL 2756.26
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 for.