

CONFIDENTIAL

KANSAS CORPORATION COMMISSION 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 | | | API No. 15 |
|---|----------------------|---|--|
| Name:Tailwater, Inc. | | | Spot Description: |
| Address 1: 6421 AVONDALE DR STE 212 | | | E2_SE_SW_SW_Sec22_Twp20_S. R20_ Fast West |
| Address 2: | | | 330 Feet from North / South Line of Section |
| City: OKLAHOMA CITY State: OK Zip: 73116 + 6428 | | | 1155 Feet from _ East / ✓ West Line of Section |
| Contact Person: Chris Mar | | | Footages Calculated from Nearest Outside Section Corner: |
| Phone: (405) 810-0900 | | | □NE □NW □SE ØSW |
| CONTRACTOR: License # 8509 | | | County: Anderson |
| Name: Evans Energy Development, Inc. | | | Lease Name: WHITESIDE Well #: 20-T |
| Wellsite Geologist: n/a | | | Field Name: Garnett Shoestring |
| Purchaser: Pacer Energy | | | Producing Formation: Squirrel |
| Designate Type of Completion: | | | Elevation: Ground: 962 Kelly Bushing: 0 |
| ✓ New Well | | | Total Depth: 823 Plug Back Total Depth: 0 |
| √i oii ⊟wsw | ☐ swb | ☐ slow | Amount of Surface Pipe Set and Cemented at: 22 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: 814 |
| Cathodic Other (Core, Expl., etc.): | | | feet depth to: 0 w/ 115 sx cmt. |
| If Workover/Re-entry: Old W | ell Info as follows: | | W/SX CITE. |
| Operator: | | | |
| Well Name: | | 1404 | Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) |
| Original Comp. Date: | Original To | otal Depth: | i |
| Deepening Re-perf. Conv. to ENHR Conv. to SWD | | <u> </u> | Chloride content: 0 ppm Fluid volume: 0 bbls |
| | Conv. to | <u> </u> | Dewatering method used: Evaporated |
| Plug Back: | Plu | g Back Total Depth | Location of fluid disposal if hauled offsite: |
| Commingled | Permit #: | | Operator Name: |
| Dual Completion | Permit #: | | Lease Name: License #: |
| SWD | Permit #: | | |
| ENHR | Permit #: | | Quarter Sec. Twp S. R. East West |
| ☐ G\$W | | | County: Permit #: |
| | | 5/9/2012 | |
| Spud Date or Date Reached TD Recompletion Date | | 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: 05/18/2012 |
| Confidential Release Date: |
| ☑ Wireline Log Received |
| Geologist Report Received |
| UIC Distribution |
| ALT I II Approved by: NAOMI JAMES Date: 05/23/2012 |