



KANSAS CORPORATION COMMISSION 1094513  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
June 2009

Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

**CONFIDENTIAL**

**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: Coffeyville Resources

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 #:

08/16/2012    08/22/2012    09/28/2012

Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-003-25519-00-00

Spot Description:

SW NW NW NW Sec. 27 Twp. 20 S. R. 20  East  West

495 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: Simons Bros. Farms Well #: 9-T

Field Name: Garnett Shoestring

Producing Formation: Squirrel

Elevation: Ground: 964 Kelly Bushing: 0

Total Depth: 860 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: 849

feet depth to: 0 w/ 115 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: 10/23/2012
- Confidential Release Date:
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: NAOMI JAMES Date: 10/24/2012