1110456

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

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: Christian L. Martin
Phone: (405) 810-0900
CONTRACTOR: License # 8509
Name: Evans Energy Development, Inc.
Wellsite Geologist: n/a
Purchaser: Coffeyville Resources

Designate Type of Completion:

- [x] New Well
- [ ] Re-Entry
- [ ] Workover

- [ ] Oil
- [ ] WSW
- [ ] SWD
- [ ] SIOW
- [ ] Gas
- [ ] D&A
- [x] 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 #:

1/10/2013	1/11/2013	1/11/2013
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25600-00-00
Spot Description:
N2 - NE - NW Sec. 27 Twp. 20 S. R. 20 [x] East [ ] West
330 Feet from [x] North / [ ] South Line of Section
1980 Feet from [ ] East / [x] West Line of Section
Footages Calculated from Nearest Outside Section Corner:
[ ] NE [x] NW [ ] SE [ ] SW
County: Anderson
Lease Name: Simons Bros. Farms Well #: 6-IW
Field Name: Garnett Shoestring
Producing Formation: Squirrel
Elevation: Ground: 947 Kelly Bushing: 0
Total Depth: 733 Plug Back Total Depth: 0
Amount of Surface Pipe Set and Cemented at: 25 Feet
Multiple Stage Cementing Collar Used? [ ] Yes [x] No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 723
feet depth to: 0 w/ 90 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

- [x] Letter of Confidentiality Received
  Date: 01/27/2013
- [ ] Confidential Release Date:
- [ ] Wireline Log Received
- [ ] Geologist Report Received
- [x] UIC Distribution

ALT [ ] I [x] II [ ] III Approved by: NAOMI JAMES Date: 01/28/2013