



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1079645
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

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

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- 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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

1079645

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Citation Oil & Gas Corp.
Well Name	Schmitt 8-10
Doc ID	1079645

All Electric Logs Run

Induction
Mirco
Density
Sonic
CBL

Form	ACO1 - Well Completion
Operator	Citation Oil & Gas Corp.
Well Name	Schmitt 8-10
Doc ID	1079645

Tops

Name	Top	Datum
Stone Corral	1018	
Hutchinson Salt	1356	
Topeka	2807	
Heebner	3026	
Toronto	3045	
Lansing	3079	
Marmaton	3340	
Arbuckle	3341	

QUALITY OILWELL CEMENTING, INC.

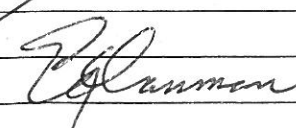
Federal Tax I.D.# 20-2886107

Phone 785-483-2025

Home Office P.O. Box 32 Russell, KS 67665

No. 460

Cell 785-324-1041

Date	Sec.	Twp.	Range	County	State	On Location	Finish
2-18-12				Ellis	Kansas		3:45PM
Lease Schmitt	Well No. 8-10		Location Gorkham 112 5th Winto				
Contractor Duke Drilling Rig 2				Owner			
Type Job Surface				To Quality Oilwell Cementing, Inc.			
Hole Size 6 3/4				T.D. 1019			
Csg. 8 3/8 24lb				Depth 1017			
Tbg. Size				Depth			
Tool				Depth			
Cement Left in Csg. 60.94				Shoe Joint 60.94			
Meas Line				Displace 60.786			
EQUIPMENT				3000 2 3/4" 60'			
Pumptrk 5	No.	Cementer	Gene				
		Helper					
Bulktrk 13	No.	Driver	Brett				
		Driver					
Bulktrk	No.	Driver	Aron Reich				
		Driver					
JOB SERVICES & REMARKS				Common 500			
Remarks:				Poz. Mix			
Rat Hole				Gel. 9			
Mouse Hole				Calcium 18			
Centralizers				Hulls			
Baskets				Salt			
D/V or Port Collar				Flowseal			
				Kol-Seal			
				Mud CLR 48			
				CFL-117 or CD110 CAF 38			
				Sand			
				Handling 527			
				Mileage			
FLOAT EQUIPMENT							
				Guide Shoe 2 3/4"			
				Centralizer 12			
				Baskets			
				AFU Inserts			
				Float Shoe			
				Latch Down			
				8 3/8 Rubber Plug			
				2 Limit Clamps			
				Pumptrk Charge Long Surface			
				Mileage 15			
				Tax			
				Discount			
				Total Charge			
X Signature 							

X Signature

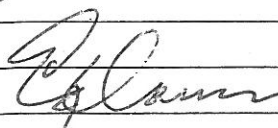
QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

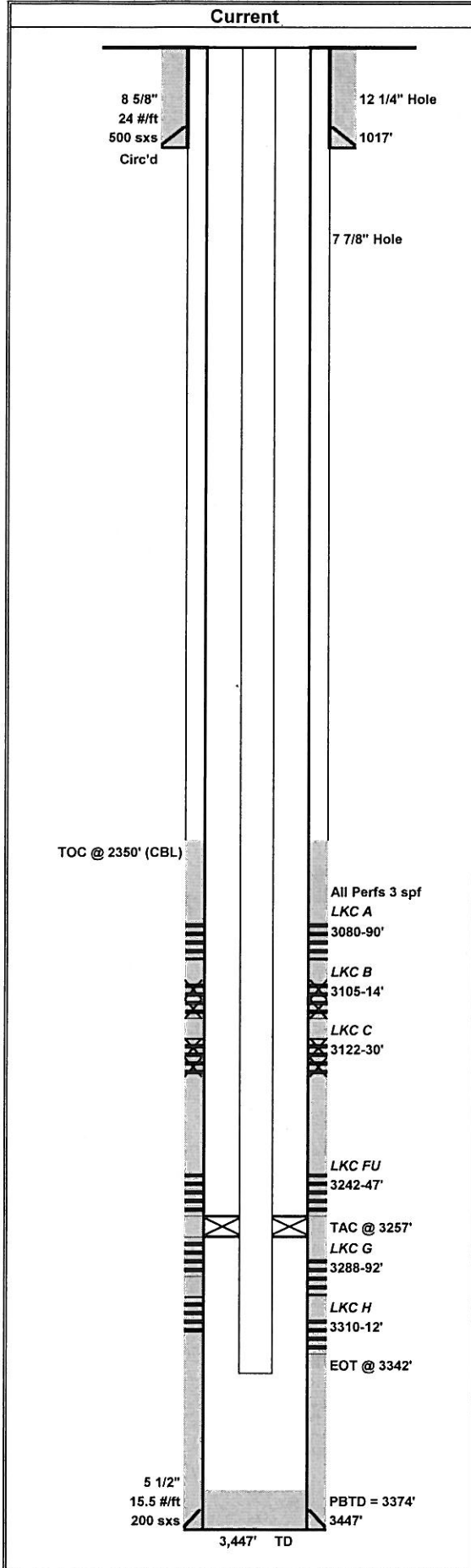
Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 464

Date		Sec.	Twp.	Range	County	State	On Location	Finish
2-22-12					Ellis	Kansas		9:30 PM
Lease Schmitt		Well No. 8-10		Location Graham 16 55N Winda				
Contractor Duke Drilling Rig 2				Owner To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.				
Type Job Longstring				Charge To Citation Oil & Gas				
Hole Size 7 7/8		T.D. 3450		Street				
Csg. 3 1/2 15 1/2		Depth 3947		City State				
Tbg. Size		Depth		City State				
Tool		Depth		City State				
Cement Left in Csg. 57.91		Shoe Joint 57.91		The above was done to satisfaction and supervision of owner agent or contractor.				
Meas Line		Displace 80 3/4 Bbl		Cement Amount Ordered 200 Cement 100 Salt				
EQUIPMENT				Label 1/2 Fl Seal 500 Gal Mud Clear 48				
Pumptrk 5	No.	Cementer	Steve	Common 200				
Bulktrk 8	No.	Helper	Steve	Poz. Mix				
Bulktrk	No.	Driver	Brett	Gel. 4				
Bulktrk	No.	Driver	Michael	Calcium				
JOB SERVICES & REMARKS				Hulls				
Remarks:				Salt 1017				
Rat Hole 30x				Flowseal 50#				
Mouse Hole				Kof Seal				
Centralizers 1 1/2 2 1/2 3 4 7 10 13 16 19 22				Mud CLR 48 500 gal				
Baskets 3 11				CFL-117 or CD110 CAF 38				
D/V or Port Collar				Sand				
30x Rat Hole				Handling 221				
Land plug @ 1300 psi				Mileage				
Float Head				FLOAT EQUIPMENT				
				Guide Shoe 2 Limit Clamp				
				Centralizer 12				
				Baskets 2				
				AFU Inserts				
				Float Shoe 1				
				Latch Down 1				
				Pumptrk Charge prod Long String				
				Mileage 15				
				Tax				
				Discount				
				Total Charge				
Signature 								

WELLBORE SCHEMATIC



Lease: Schmitt		Well No. 8-10		
API No.				
Location:				
County: Russell	State: KS	Field: Fairport		
TD: 3447'	Spud Date: 2/4/2012		Comp Date: 2/13/2012	
PBTD: 3374'	Current Zone: LKC A, LKC Fu, LKC G, LKC H			
Current Perfs/OH: 3080-90', 3242-47', 3288-92', 3310-12'				
Surface Equipment				
Unit Make: Lufkin		Unit Size: 228D-200-74		
Unit S/N:		Unit Rotation:		
SPM: 12.4	Stroke Length: 74"	Unit Sheave:		
Prime Mover:		Motor Sheave:		
Motor S/N:		Motor RPM:		
Casing Breakdown				
	Size	Grade / Wt	Depth	Cement
Surface	8 5/8"	24 #/ft	1017'	500 sxs
Production	5 1/2"	15.5 #/ft	3447'	200 sxs
Production				
Production				
Liner				
Completion Assembly				
Qty	Description	Footage		
1	KB	5.0'		
100	2-7/8" tbg	3250.0'		
1	5-1/2" x 2-7/8" TAC	3.4'		
2	2-7/8" tbg	65.0'		
1	SN	1.1'		
1	2" Pump	15.0'		
TOTAL			3339.50'	
Rod Detail				
Qty	Description	Footage		
134	3/4" Norris D	3342.00'		
TOTAL			3342.00'	
Comments				
LKC A-C sqz'd w/ 250 sxs common w/ 2% CC to 1000#, LKC A reperforated and produced				
PREPARED BY: JH		UPDATED: 3/1/2012		

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

April 26, 2012

Kimberly Moorhead
Citation Oil & Gas Corp.
14077 Cutten Rd
PO BOX 690688
HOUSTON, TX 77269-0688

Re: ACO1
API 15-051-26237-00-00
Schmitt 8-10
SW/4 Sec.01-13S-16W
Ellis County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Kimberly Moorhead