



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1108014
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: _____



1108014

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Citation Oil & Gas Corp.
Well Name	Baumer B 67
Doc ID	1108014

All Electric Logs Run

Geologist Report
Induction Array Log
Micro Log
Compensated Neutron Log

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
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

March 27, 2013

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

Re: ACO1
API 15-051-26451-00-00
Baumer 67
E/2 Sec.27-11S-17W
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,
Tami Troxel

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

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

No. 8469

Cell 785-324-1041

Date	8-23-13	Sec. 27	Twp. 11	Range 17	County Ellis	State KS	On Location	Finish 11:30pm
Lease					Location			
Baumer					Salina River Road 25 Winto			
Well No. 67			Owner					
Contractor Duce #10			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 Surface			Charge To			Citation 0.1		
Hole Size 12 1/4		T.D. 1181		Street				
Csg. 8 5/8		Depth 1176		City		State		
Tbg. Size		Depth		The above was done to satisfaction and supervision of owner agent or contractor.				
Tool		Depth		Cement Amount Ordered 500 Com 3000 2 1/2 AF				
Cement Left in Csg. 80.39		Shoe Joint 80.39						
Meas Line		Displace 69 1/2 BCL						
EQUIPMENT				Common				
Pumptrk 9	No.	Cementer		Poz. Mix				
Bulktrk	No.	Driver		Gel.				
Bulktrk 13	No.	Driver		Calcium				
JOB SERVICES & REMARKS				Hulls				
Remarks:				Salt				
Rat Hole				Flowseal				
Mouse Hole				Kol-Seal				
Centralizers				Mud CLR 48				
Baskets				CFL-117 or CD110 CAF 38				
D/V or Port Collar				Sand				
8 5/8 on bottom. 13' Circulation.				Handling				
Mix 500 SIK + Displace Plug.				Mileage				
Baffle Plate @ 1095.61				FLOAT EQUIPMENT				
Mix 500 SIK + Displace Plug.				Guide Shoe 8 5/8				
Cement Circulation				Centralizer 11				
				Baskets Baffle Plate				
				AFU Inserts Rubber Plug				
				Float Shoe				
				Latch Down				
				Pumptrk Charge				
				Mileage				
				Tax				
				Discount				
X Signature				Total Charge				

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. 8498

Date	Sec.	Twp.	Range	County	State	On Location	Finish
3-28-13	27	11	17	ELLIS	KANSAS		9:00 Am

Location CORREY RD - 10 1/2 N - W/INTD

Lease	Well No.	Owner
BALMER	#67	CITATION OIL
Contractor	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	PROD. STRING	
Hole Size	T.D.	Charge To
7 7/8"	3514	CITATION OIL
Csg.	Depth	Street
5 1/2" - 15 LB NEW	3511	14077 CUTTEN RD
Tbg. Size	Depth	City
		HOUSTON
Tool	Depth	State
		TX, 77269
Cement Left in Csg.	Shoe Joint	The above was done to satisfaction and supervision of owner agent or contractor.
	84.316	
Meas Line	Displace	Cement Amount Ordered
	83 3/4	235

EQUIPMENT

Pumptrk	No.	Cementer	Common
#11		Helper	Poz. Mix
Bulktrk	No.	Driver	Gel.
#14		Driver	Calcium
Bulktrk	No.	Driver	
D11		Driver	

JOB SERVICES & REMARKS

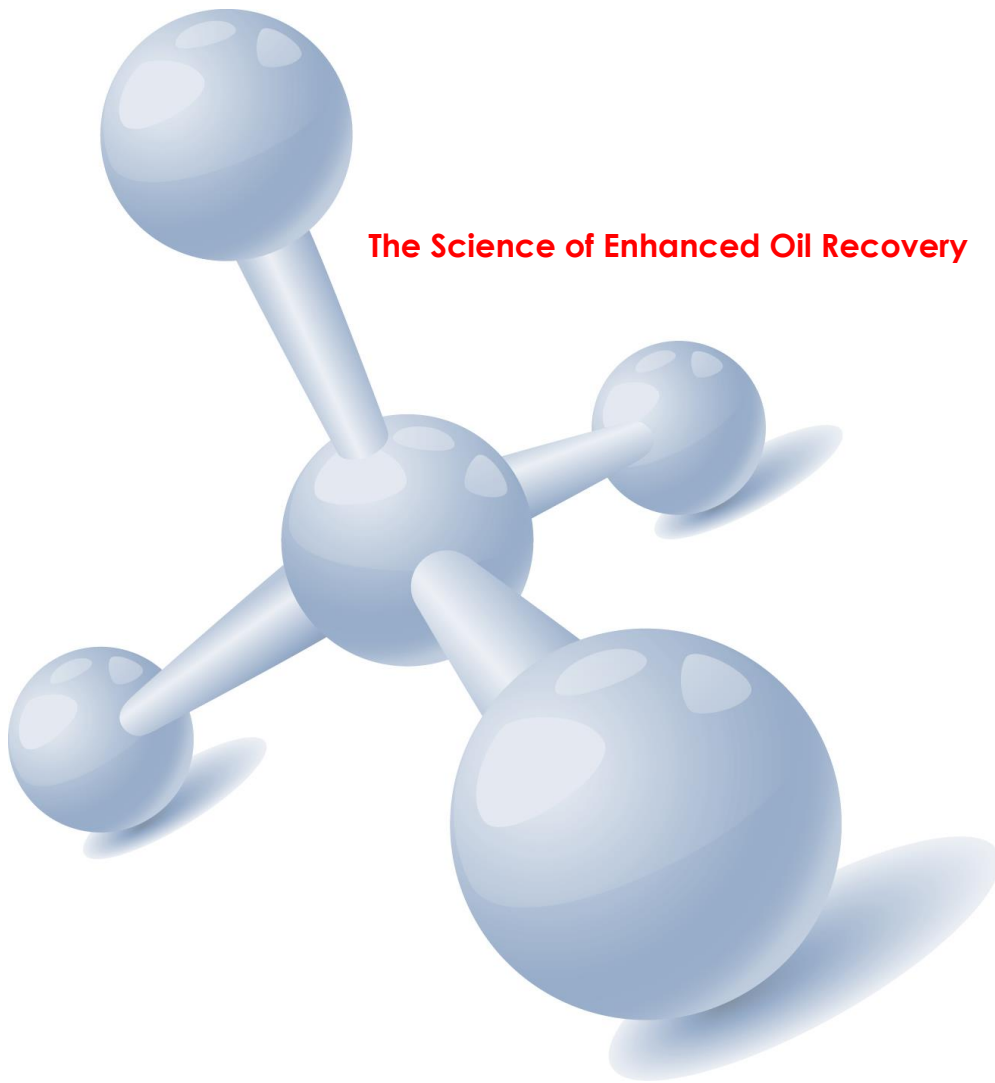
Remarks:	Salt
Rat Hole	Flowseal
30 SKS	
Mouse Hole	Kol-Seal
15 SKS	
Centralizers	Mud CLR 48
	500 GAL
Baskets	CFL-117 or CD110 CAF 38
D/V or Port Collar	Sand
	Handling
	Mileage

FLOAT EQUIPMENT

Guide Shoe	
Centralizer	12.5 1/2" TUBES
Baskets	2.5 1/2"
AFU Inserts	
Float Shoe	
Latch Down	1.5 1/2" W/PLUG

Pumptrk Charge	
Mileage	
Tax	
Discount	
Total Charge	

X Signature [Signature]



The Science of Enhanced Oil Recovery

Treatment Summary For

Citation Oil & Gas Corp.

MARCITsm Gel Conformance

Bemis-Shutts

Baumer #67

Ellis County, Kansas

April 16, 2013

TIORCO
A NALCO & STEPAN COMPANY

TREATMENT SUMMARY

PURPOSE

Use MARCITsm polymer gel technology to 1) decrease water production, 2) lower producing fluid level, 3) improve draw-down on oil-saturated reservoir matrix rock, 4) improve oil recovery and well economics.

TREATMENT

TIORCO equipment and personnel arrived on location on April 12, 2013. A tailgate safety meeting was held to discuss all potential hazards specific to the job. TIORCO's Portable Unit #17 was connected to frac tanks for treatment supply water and to the wellhead for polymer solution injection. The unit was then connected to an electrical source. The treatment consisted of 740 BBLs of gel. The treatment started on April 12, 2013 at 18:12 and ended on April 13, 2013 at 13:07. The gel was made-up of 990 lbs. of EOR204 (Medium molecular weight polymer) and 212 lbs. of EOR684 (crosslinker). Details for each stage of the treatment, job log, and injection charts are included.

MARCITsm GEL QA/QC

Representative samples of cross-linked polymer solution were collected during all treatment stages to ensure that the intended gels would ultimately form. Pre-gel samples were stored at a temperature of 120°F in an oven onboard the TIORCO portable polymer injection unit. All samples indicated that gels formed as intended.

TIORCO is very interested in monitoring and evaluating the results of this treatment with time. If you should have questions or comments regarding the job, please do not hesitate to contact Mike Lantz in our Denver office at (303) 923-6440. We greatly appreciate the opportunity to be of service to Citation Oil & Gas Corp. and look forward to working with you again in the future.



TREATMENT STAGE LOG

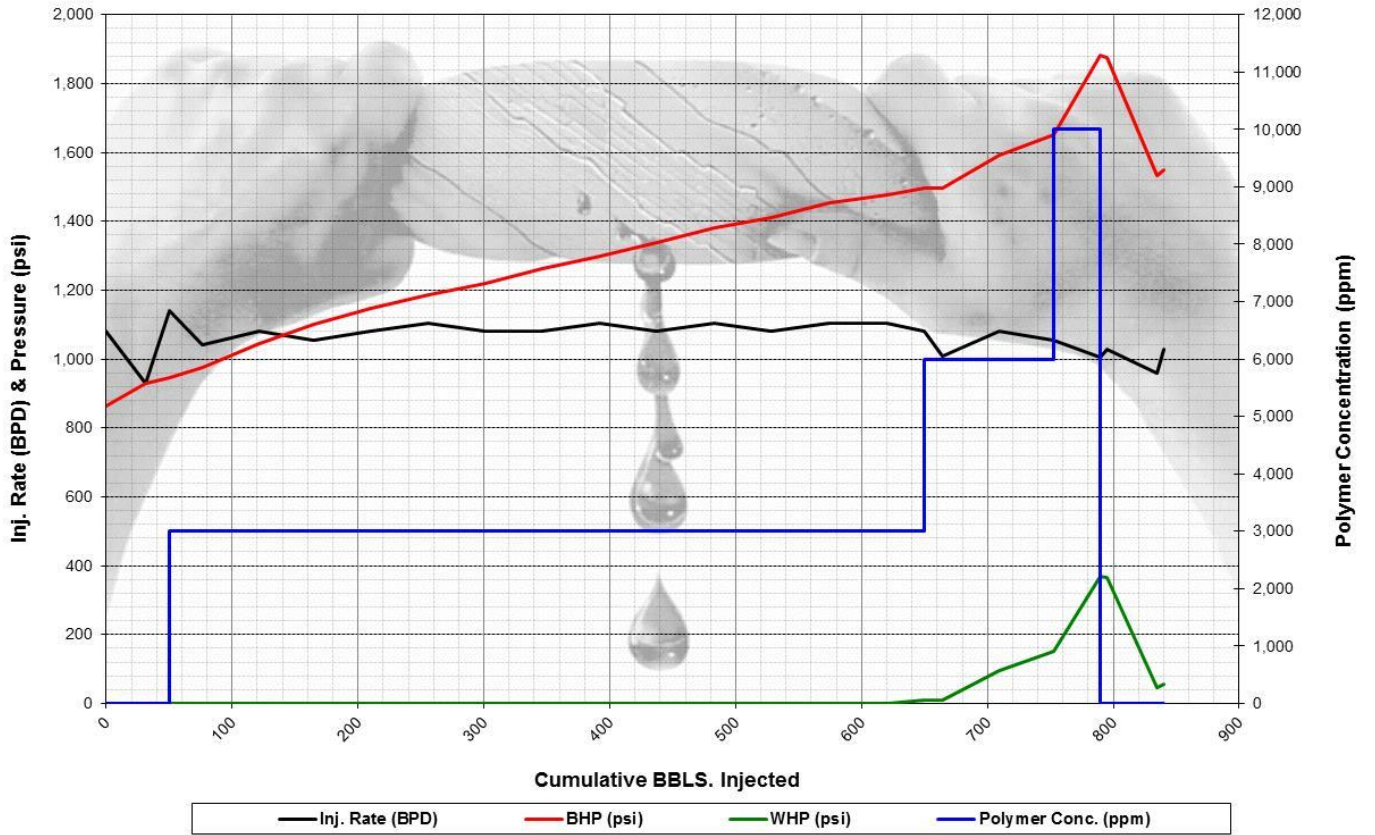
Stage	Date	Time	Date	Time	Polymer ppm	BBLs / Stage	WHP (psi)		BHP (psi)		Pump Rate (bpd)		Comments
	Begin	Begin	End	End			Begin	End	Begin	End	Begin	End	
1	4/12/13	6:12 PM	4/12/13	7:24 PM	0	50	0	0	864	947	1,080	1,080	Stage # 1: Water Flush With RU189 & K-31w
2	4/12/13	7:24 PM	4/13/13	8:40 AM	3,000	600	0	10	947	1,496	1,080	1,080	Stage # 2: 3,000 PPM With K-31w
3	4/13/13	8:40 AM	4/13/13	11:00 AM	6,000	103	10	152	1,496	1,653	1,080	1,080	Stage # 3: 6,000 PPM With K-31w
4	4/13/13	11:00 AM	4/13/13	11:53 AM	10,000	37	152	370	1,653	1,881	1,080	1,080	Stage # 4: 10,000 PPM With K-31w
5	4/13/13	11:53 AM	4/13/13	1:07 PM	0	50	370	55	1,881	1,550	1,080	1,080	Stage #5: Water Flush With RU189 & K-31w
Totals						840							

MARCITSM GEL QA/QC

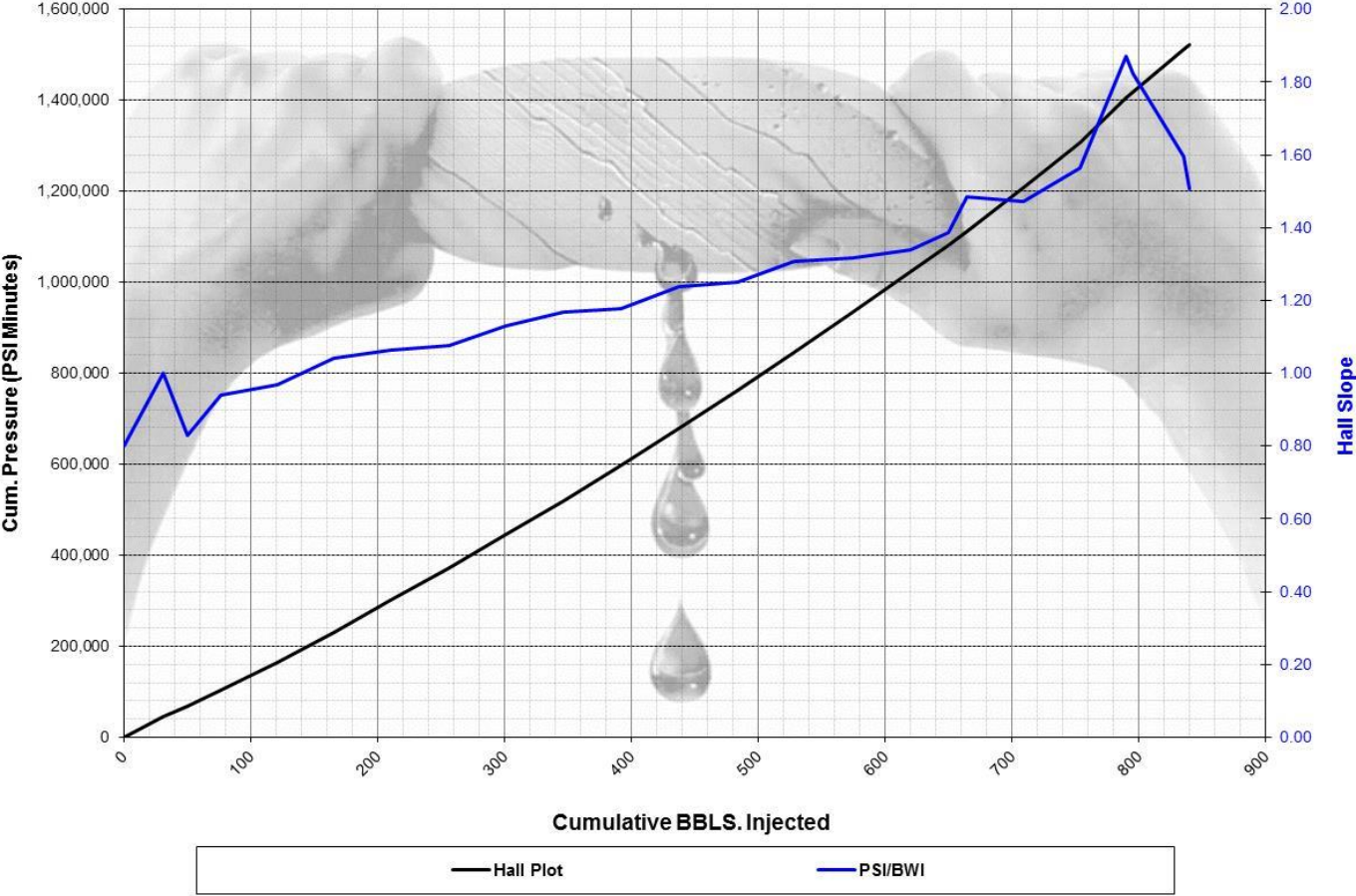
Sample No.	Treatment Stage	Sample Date	Sample Time	Cum. Bbls.	Polymer ppm	Polymer:X-Linker Ratio	Comments
1	2	04/12/13	19:00	121	3,000	40:1	Graded 3g
2	2	04/13/13	08:00	620	3,000	40:1	Graded 3g
3	3	04/13/13	10:00	709	6,000	40:1	Graded 7g
4	4	04/13/13	11:53	790	10,000	40:1	Graded 9e



RATE, PRESSURE, & CONCENTRATION



HALL SLOPE



TREATMENT JOB LOG

DATE	TIME	INJECTION RATE		CUM. INJ BBLs	WHP PSI	BHP PSI	HALL SLOPE	Polymer PPM	POLYMER LBS: Estimate	COMMENTS
		BPD	BPM							
12-Apr-13	18:12	1,080	0.75	0	0	864	0.80	0	0	Begin Well Treatment -Stage #1: Water Flush with Champion RU 189 and K-31w
12-Apr-13	19:00	930	0.65	31	0	931	1.00	0	0	
12-Apr-13	19:24	1,140	0.79	50	0	947	0.83	0	0	End Stage #1
12-Apr-13	19:24	1,140	0.79	50	0	947	0.83	3,000	0	Begin Stage #2: 3,000 PPM with Champion K-31w
12-Apr-13	20:00	1,040	0.72	76	0	977	0.94	3,000	27	
12-Apr-13	21:00	1,080	0.75	121	0	1,045	0.97	3,000	74	Took Sample #1: Graded 3g
12-Apr-13	22:00	1,056	0.73	165	0	1,101	1.04	3,000	121	
12-Apr-13	23:00	1,080	0.75	210	0	1,148	1.06	3,000	168	
13-Apr-13	0:00	1,104	0.77	256	0	1,187	1.08	3,000	216	
13-Apr-13	1:00	1,080	0.75	301	0	1,219	1.13	3,000	263	
13-Apr-13	2:00	1,080	0.75	346	0	1,261	1.17	3,000	310	
13-Apr-13	3:00	1,104	0.77	392	0	1,300	1.18	3,000	359	
13-Apr-13	4:00	1,080	0.75	437	0	1,338	1.24	3,000	406	
13-Apr-13	5:00	1,104	0.77	483	0	1,381	1.25	3,000	454	
13-Apr-13	6:00	1,080	0.75	528	0	1,411	1.31	3,000	501	
13-Apr-13	7:00	1,104	0.77	574	0	1,455	1.32	3,000	550	
13-Apr-13	8:00	1,104	0.77	620	0	1,478	1.34	3,000	598	Took Sample #2: Graded 3g
13-Apr-13	8:40	1,080	0.75	650	10	1,496	1.39	3,000	629	End Stage # 2
13-Apr-13	8:40	1,080	0.75	650	10	1,496	1.39	6,000	629	Begin Stage #3: 6,000 PPM with Champion K-31w
13-Apr-13	9:00	1,008	0.70	664	10	1,497	1.49	6,000	659	
13-Apr-13	10:00	1,080	0.75	709	95	1,591	1.47	6,000	753	Took Sample #3: Graded 7g
13-Apr-13	11:00	1,056	0.73	753	152	1,653	1.57	6,000	845	End Stage # 3
13-Apr-13	11:00	1,056	0.73	753	152	1,653	1.57	10,000	845	Begin Stage #4: 10,000 PPM with Champion K-31w
13-Apr-13	11:53	1,005	0.70	790	370	1,881	1.87	10,000	975	End Stage #4; Took Sample #4: Graded 9e
13-Apr-13	11:53	1,005	0.70	790	370	1,881	1.87	0	975	Begin Stage #5: Water Flush with Champion RU 189 and K-31w
13-Apr-13	12:00	1,029	0.71	795	365	1,874	1.82	0	975	
13-Apr-13	13:00	960	0.67	835	45	1,533	1.60	0	975	
13-Apr-13	13:07	1,029	0.71	840	55	1,550	1.51	0	975	End Stage #5: Treatment Completed

