Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1122436

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 #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
OG GSW Temp. Abd. CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
	Quarter Sec TwpS. R East West
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date Recompletion Date	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:											

	Page Two	
Operator Name:	Lease Name:	Well #:
Sec TwpS. 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 (Attach Additional Sho	eets)	Yes No		-	on (Top), Depth an		Sample
Samples Sent to Geolog	gical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASING	RECORD Ne	w Used			
		Report all strings set-	conductor, surface, inte	ermediate, product	ion, 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 / SQL	EEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and P	ercent Additives	
Protect Casing							

[Did you perform a hydraulic	fracturing treatment	on this well?	Yes	No	(If No, skip questions 2 and 3)	
Plug Off Zone							
Protect Casing Plug Back TD							
	Perforate	TOP BOLIOTI		[

Did you perform a nyuradilo naotaring iteatment on this weit?
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?

		L	
	Yes	[
\square	Yes	[_

No (If No, skip question 3)

No (If No, fill out Page Three of the ACO-1)

Shots Per Foot				RD - Bridge Plugs Set/Ty Each Interval Perforated	vpe		Acid, Fracture, Shot, Ce (Amount and Kind	ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Siz	e:	Set At:	: Pack	er At:	Liner F		No	
Date of First, Resumed	Producti	on, SWD or ENHF	}.	Producing Method:	nping	Gas Lift	Other (Explain)		
Estimated Production Oil Bbls. Per 24 Hours				Gas Mcf	Wat	er	Bbls.	Gas-Oil Ratio	Gravity
				I					
DISPOSITI		_				PRODUCTION INTI	ERVAL:		
Vented Solo	1 []	Jsed on Lease		Open Hole Perf.	Uually (Submit		Commingled (Submit ACO-4)		
(If vented, Su	bmit ACO	-18.)		Other (Specify)			. ,		



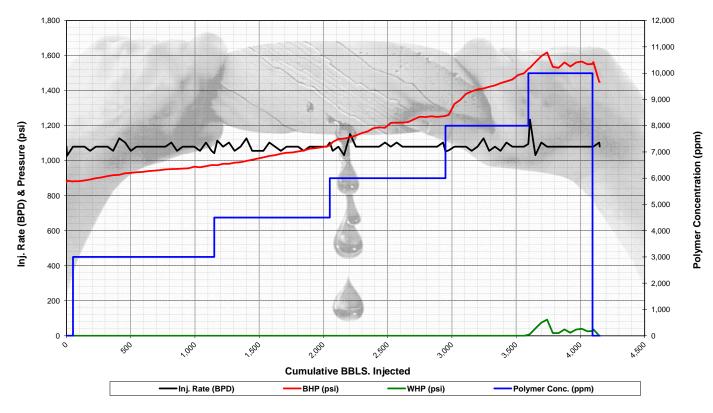
Company Name: Citation Oil & Gas Corp. Field Name: Bernis-Shutts Well Name: Baumer #60 Well Type: Production County and State: Ellis County, Kansas Portable Unit #: 17 Report Date: March 10, 2013

MARCIT Polymer Gel Treatment

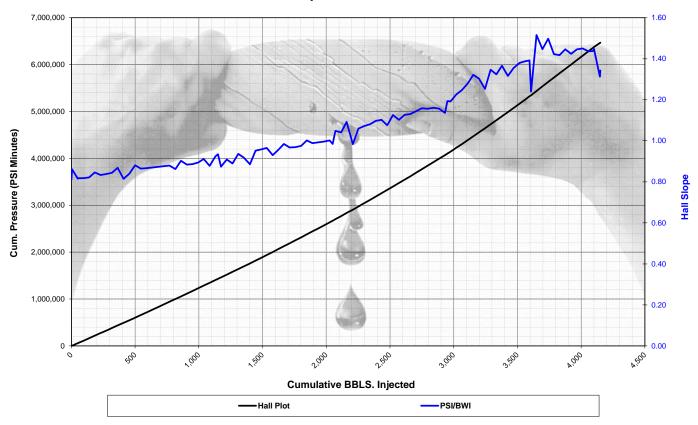
Treatment Summary and Charts

Stage	Date	Time	Date	Time	Polymer	BBLS /	WHP	(psi)	BHP	(psi)	Pump R	ate (bpd)	Comments
Stage	Begin	Begin	End	End	ppm	Stage	Begin	End	Begin	End	Begin	End	Comments
1	3/6/13	6:53 PM	3/6/13	8:00 PM	0	50	0	VAC	875	881	1,080	1,080	Stage # 1: Water Flush w/ K-31W & RU-189
2	3/6/13	8:00 PM	3/7/13	8:29 PM	3,000	1,100	VAC	VAC	881	975	1,080	1,080	Stage # 2: 3000 PPM w/ K-31W
3	3/7/13	8:29 PM	3/8/13	4:30 PM	4,500	900	VAC	VAC	975	1,087	1,080	1,080	Stage # 3: 4500 PPM w/ K-31W
4	3/8/13	4:30 PM	3/9/13	12:26 PM	6,000	900	VAC	VAC	1,087	1,256	1,080	1,080	Stage # 4: 6000 PPM w/ K-31W
5	3/9/13	12:26 PM	3/10/13	2:46 AM	8,000	645	VAC	5	1,256	1,525	1,080	1,080	Stage # 5: 8000 PPM w/ K-31W
6	3/10/13	2:46 AM	3/10/13	1:52 PM	10,000	500	5	27	1,525	1,553	1,080	1,080	Stage # 6: 10,000 PPM w/ K-31W
7	3/10/13	1:52 PM	3/10/13	3:04 AM	0	50	27	VAC	1,553	1,450	1,080	1,080	Stage # 7: Water Flush w/K-31 & RU-189
Totals													

Injection Rate, Pressure , & Concentration



Hall Slope and Psi/BWI



		VELL CEMENTING INC.
Phone 785-483-2025	Home Office	VELL CEMENTING, INC. erat Tax I.D.# 20-2886107 e P.O. Box 32 Russell, KS 67665 No. 6517
Cell 785-324-1041		County State On Location Finish
Sec.	Twp. Range	
Date D-12.13 27	11 1 /	Ellis K5 4.45pm.
P a		Location Colla Kver Kond 25 Winto
Lease Davmer	Well No	Owner To Quality Oilwell Cementing, Inc.
Contractor DUKE #10		You are hereby requested to rent cementing equipment and furnish cementer and hereby reduces to assist owner or contractor to do work as listed.
Type Job Conductor		abarra di Di La
Hole Size 1/2	T.D. 41	To Lition Vil YORS
Csg. 1378	Depth 40	Street
Tbg. Size	Depth	City State
Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
Cement Left in Csg. 1.5	Shoe Joint	Cement Amount Ordered 50 LOM 4 10/10/2012
Meas Line	Displace 4.BC	U.SEI 100.5K
EQUIP	Metal Naia	Common / 3/2
Pumptrk Helper	Jer Jer	Poz. Mix
Bulktrk No. Driver Driver		Gel.
Bulktrk 14 No. Driver Bri	W	Calcium 4
JOB SERVICES	& REMARKS	Hulls
Remarks:	New York Control of the second se	Salt
Rat Hole		Flowseal
Mouse Hole		Kol-Sea!
Centralizers		Mud CLR 48
Baskets		CFL-117 or CD110 CAF 38
D/V or Port Collar		Sand
Conductor sete.	40' 1	Handling 150
	Jace Camen+-	Mileage
	n Dackside.	FLOAT EQUIPMENT
Alar Staled	Ful.	Guide Shoe
		Centralizer 8518 Swage
		Baskets
		AFU Inserts
		Float Shoe
		Latch Down
		Pumptrk Charge / onder tor Surface
ſ	e a a se	Mileage //
1		Tax
		Discount
x Still	ч.	Total Charge
Signature	2man	

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N

QUALITY OILWELL CEMENTING, INC. Federal Tax I.D.# 20-2886107

Phone 785-483-2025

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

No. 6412

Cell	785-3	24-10	041				5							
				Sec.	Twp,	Range	0	County	State	On Location	Finish			
Date	2.	14.	13	27			EL	LIS	KANSAS		9:35 Am			
					Ē		Locatio	on CODEI	11 KD - 10N	· W/INTO	D			
Lease	Be	un	NER	4	<u> </u>	Well No. # La	0	Owner C	ITATION	OTL				
Contra	actor	SUL	Et	=10				Vou ara hora	ilwell Cementing, Inc.	comenting equipmen	t and furnish			
Type .	Job L	. 51	LRE	ACC		1		cementer an	d helper to assist owr	er or contractor to d	o work as listed.			
Hole S	Size	ak	4		T.D.	279		Charge Co	TATION U	IL				
Csg.	85/2	3			Depth	1,273		Street 40	77 CUTTEN	RD.				
Tbg. S	Size	-			Depth				STON	State				
Tool					Depth		i		s done to satisfaction ar	~				
Ceme	nt Left	in Cso].		Shoe J	oint 54.3	1	Cement Amo	ount Ordered 500	CLASSA-3	as age there			
Meas	Line				Displac	· 77/23	bla							
	,			EQUIPI	MENT			Common 5	00					
Pump	urkt /	5 No.	Ceme Helpe		CKW			Poz. Mix						
Bulktr		h No.	Drive	RTU	LVK.		1	Gel. 10			2			
Bulktr	and the second	UNO.	Drive Drive	CIS	co			Calcium /	8					
					& REMA	RKS		Hulls						
Rema	rks:	1	1 - D					Salt						
Rat H	ole							Flowseal						
Mouse	e Hole							Kol-Seal						
Centra	alizers							Mud CLR 48						
Baske	ets	100						CFL-117 or	CD110 CAF 38					
D/V o	r Port (Collar						Sand	<u></u>					
								Handling)28					
(E.	ne	NT	DIC	C-I	PRULATI	51	Mileage						
									FLOAT EQUIPM	ENT				
								Guide Shoe						
								Centralizer	12.85/8"					
								Baskets						
			363			8		AFU Inserts						
								Float Shoe						
trained to a second									2-878 5	TOD RINGS				
								1-8	578 BAFFLE	DLATE				
								1-8	35'S'"RUBBE	e PLUG				
	د	TH	AN	K Ve	x.			Pumptrk Ch	arge Louis S	urface				
					0			Mileage 2	1					
				0						Ta	x			
		9	40	Jan	m	•				Discour	it			
X Signa	nture -	0	The			34				Total Charge	8			
			1											

QUALITY OILWELL CEMENTING, INC. Federal Tax 1.D.# 20-2886107

Phone 785-483-2025 Cell 785-324-1041	Но			0x 32 Ru	ssell, KS 67665	No.	6416		
Sec.	Twp.	Range	(County	State	On Location	Finish		
Date 2 - 14-13 27	11	17	FI	ITS	KANSAS		3:15 pm		
outo de pri to de l				ON CODE		WINTO			
Lease BALMER	W	ell No. #	Q.	Owner C. To Quality	Dilwell Cementing, Inc. reby requested to rent nd helper to assist owr	cementing equipment	and furnish work as listed.		
Type Job PROD - STEERING	TD 2	1.00			TTATION OTL				
Hole Size	a second a consecutive of the second	600,	< ``		77 CUTTEN	Dr			
Cog. 5-2- 1518-NEW	Depth	1.270.1	104	City Hou		State TX, 7	72109		
Tbg. Size	<u> </u>				vas done to satisfaction ar				
Tool	Depth	02 =	~		nount Ordered 235	N	DY LAT		
Cement Left in Csg.	Shoe Joi			Cement A	CCC Deleter and	CLASS H, IUSALI	agel, 9PW		
Meas Line	Displace	84 X4 b	NIS		シップ				
EQUIPM			100 (100 and a company of a 1 (1 and a) bloch	Common	30				
Pumptre 15 Helper NTC	KW.			Poz. Mix					
Bulktrik 1 No. Driver	ЭH.			Gel. H					
Bulktrk Plu Driver Crsc	DA.			Calcium					
JOB SERVICES	& REMAR	KS		Hulls					
Remarks:				Saltof					
Hat Hole 30-5K5		19 19 19 19 19 19 19 19 19 19 19 19 19 1		Flowseal 3.5 7					
Mouse Hole				Kol-Seal					
Centralizers 1, 2, 4, 6, 8, 10, 13	14.16.1	8,00,00	24,20	Mud CLR	18 500 GAL.				
Baskets PINS OF#3#	₩q		•	CFL-117 0	r CD110 CAF 38				
D/V or Port Collar		1		Sand					
a e manaman (esta biologia) i kan in te an ny an inte an an de Ali Batangangananana y ka akabébéngan an				Handling	259				
DROPDED BALLE E	BONKE	CTPMIII	ATTON	Mileage					
CTECULATED She					FLOAT EQUIPM	IENT			
500 gal - pugger R	or w F	27400	5 -	Guide Sho	e				
MIXED & PUMPED 20	15 eve	ha sas	5:41	Centralize	14-5%"	UPBOS			
LISCONNECTED DED		Juc th	VAGUE	Baskets	2-5 12" WEAT	HEPFORNS			
DISCONVECTED LED	HED.	puyou		AFU Inser					
brund - pizorace br	uyuno	booding		Float Shoe					
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Plug LANDED @ 844	TODIZ 2		-07-	+	LY LUIN ONLL				
				Pumptrk C	harge Grog h	MA String			
				Mileage	11 1 1 1 1 1 1 1 1	my sing			
THHNK YO	U's-			willeage	1	Tax			
						Discount			
x Tollow		<u> </u>		-		Total Charge			
Signature						iotal officigo	L		

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 20, 2013

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

Re: ACO1 API 15-051-26442-00-00 Baumer 60 N/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