



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
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

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

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

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total 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

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



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

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

INSTRUCTIONS: Show important tops and base 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. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> 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
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

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
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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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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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

August 23, 2013

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

Re: ACO1
API 15-065-23904-00-00
McClellan 17
SE/4 Sec.02-10S-21W
Graham 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,
Liana Ramirez

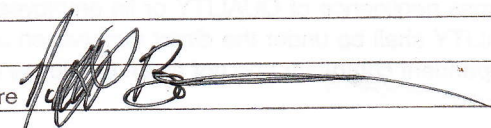
QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

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

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

No. 6690

Date	4-10-13	Sec.	2	Twp.	10	Range	21	County	Cornham	State	KS	On Location		Finish	2:00p.m.
Lease								Well No.		Owner					
Contractor								Duke #2		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					
Hole Size								12 1/4		Citation Oil & Gas					
Csg.								8 5/8		Street					
Tbg. Size										City					
Tool										State					
Cement Left in Csg.								62'		The above was done to satisfaction and supervision of owner agent or contractor.					
Shoe Joint								62'		Cement Amount Ordered					
Meas Line								Displace		6500m 3064 2066EL					
								108BL		1/4" Flow					
EQUIPMENT												Common			
Pumptrk 9 No. Cementer												650			
Bulktrk 14 No. Helper												Poz. Mix			
Bulktrk 4 No. Driver												Gel. 12			
												Calcium 23			
JOB SERVICES & REMARKS												Hulls			
Remarks:												Salt			
Rat Hole												Flowseal 325			
Mouse Hole												Kol-Seal			
Centralizers												Mud CLR 48			
Baskets												CFL-117 or CD110 CAF 38			
D/V or Port Collar												Sand			
8 5/8 set @ 1758. Ball Valve 1696												Handling 688			
Est. Circulation. Mix 650 SK +												Mileage			
Displace Plug. Plug landed @ 1200ft.												FLOAT EQUIPMENT			
Shut in @ 600ft.												Guide Shoe 8 5/8			
<u>Cement Circulated!</u>												Centralizer 12			
												Baskets 1			
												AFU Inserts 2 Limit Clamps			
												Float Shoe Ball Valve Plate			
												Latch Down Rubber Plug			
												Pumptrk Charge Long Surface			
												Mileage 43			
												Tax			
												Discount			
												Total Charge			
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. 6738

Date	4-15-13	Sec.	2	Twp.	10	Range	21	County	Corchum	State	KS	On Location		Finish	9:15 AM
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Location Daleo S to Y Rd 3 1/2 3/4 S

Lease McClellan Well No. 17 Owner West nitc

Contractor Duke 2
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 pipe 306
Hole Size 7 7/8 T.D. 4015 Charge To Citation Oil & Gas Corp

Csg. 5/2 Depth 4012 Street Citation Oil & Gas Corp

Tbg. Size Depth 3927.70 City State

Tool Depth The above was done to satisfaction and supervision of owner agent or contractor.

Cement Left in Csg. 85ft Shoe Joint 85ft Cement Amount Ordered 235 sks Combech

Meas Line 15.5# Displace 93.5 BBL 10% Salt 2% gel 1/4 flow seal

EQUIPMENT

Pumptrk	1	No.	Cementer	<u>Matt</u>	Common	<u>235</u>
			Helper		Poz. Mix	
Bulktrk	12	No.	Driver	<u>Brett</u>	Gel.	<u>4</u>
			Driver		Calcium	20
Bulktrk	pa	No.	Driver	<u>Doug</u>	Hulls	
			Driver		Salt	<u>20</u>

JOB SERVICES & REMARKS

Remarks:

Rat Hole 30 sks Flowseal 58#

Mouse Hole 15 sks Kol-Seal

Centralizers Mud CLR 48 500 gal

Baskets CFL-117 or CD110 CAF 38

D/V or Port Collar Sand

Droped Ball Circulated Handling 259

30 mm plugged Port Mileage

and mouse hole mit

FLOAT EQUIPMENT

190 clam hole Droped Guide Shoe

Latch down displaced 93.5 BBL Centralizer tubes 14 5/2

float held Big down Baskets 2 5/2

1000 Lift pressure AFU Inserts

1500 latched plug Float Shoe 5/2 1

Latch Down 5/2 1

Pumptrk Charge prod Long String

Mileage 43

Tax

Discount

Total Charge

X Signature [Signature]

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



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Fax: 316-337-6211
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Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

August 30, 2013

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

Re: ACO-1
API 15-065-23904-00-00
McClellan 17
SE/4 Sec.02-10S-21W
Graham County, Kansas

Dear Liana Ramirez:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 4/8/2013 and the ACO-1 was received on August 23, 2013 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department