Confidentiality Requested: Yes No

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

1140241

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.xxxxx) (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: | | | | | |
| ☐ Oil ☐ WSW ☐ SWD ☐ SIOW □ Gas □ D&A □ ENHR □ SIGW | SIOW Elevation: Ground: Kelly Bushing: | | | | | |
| □ Gas □ DaA □ ENHA □ SIGW □ OG □ GSW □ Temp. Abd. | Total Vertical Depth: Plug Back Total Depth: | | | | | |
| CM (Coal Bed Methane) | Amount of Surface Pipe Set and Cemented at: Feet | | | | | |
| Cathodic Other (Core, Expl., etc.): | Multiple Stage Cementing Collar Used? Yes No | | | | | |
| 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 #: | Dewatering method used: | | | | | |
| Dual Completion Permit #: SWD Permit #: | | | | | | |
| ENHR Permit #: | Location of fluid disposal if hauled offsite: | | | | | |
| GSW Permit #: | Operator Name: | | | | | |
| | Lease Name: License #: | | | | | |
| Soud Data or Data Data Data Data TD Completion Data an | Quarter Sec TwpS. R East West | | | | | |
| Spud Date orDate Reached TDCompletion Date orRecompletion DateRecompletion 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 | | Log Formation (Top), Depth and Datum | | | Sample |
|--|----------------------|------------------------------|--------------------------|--------------------------------------|-------------------|------------------|-------------------------------|
| Samples Sent to Geolog | gical Survey | Yes No | Nam | 9 | | Тор | Datum |
| Cores Taken Electric Log Run | | ☐ Yes ☐ No ☐ Yes ☐ No | | | | | |
| List All E. Logs Run: | | | | | | | |
| | | | | | | | |
| | | | RECORD Ne | | | | |
| | | Report all strings set-o | conductor, surface, inte | rmediate, 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 F | ercent Additives | |
| Protect Casing | | | | | | | |

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

Yes

Yes

No

No

| | | | 0 | |
|--------|-------------|--------------|-------------------|--|
| Does t | he volume | of the total | base fluid of the | e hydraulic fracturing treatment exceed 350,000 gallons? |
| Was th | e hydraulic | fracturing | treatment inform | nation submitted to the chemical disclosure registry? |

| (| onap | 9400010110 2 | |
|---------|------|--------------|--|
| (If No, | skip | question 3) | |

(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 | | | | | | Depth | | | |
|--|---|--------|---------|---------------------------|---------------|---------|----------|-----------------|---------------|---------|
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| TUBING RECORD: | Siz | e: | Set At: | | Packer | r At: | Liner R | un: | No | |
| Date of First, Resumed Production, SWD or ENHR. | | | | Producing N | lethod: | ping | Gas Lift | Other (Explain) | | |
| Estimated Production Per 24 Hours | | Oil Bb | ls. | Gas | Mcf | Wate | er | Bbls. | Gas-Oil Ratio | Gravity |
| DISPOSITION OF GAS: METHOD OF COMPL | | | | | PRODUCTION IN | TERVAL: | | | | |
| Vented Sold Used on Lease Open Hole Perf. Dually (Submit Action of the control o | | | , | Commingled (Submit ACO-4) | | | | | | |

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

| Form | ACO1 - Well Completion |
|-----------|--------------------------|
| Operator | Citation Oil & Gas Corp. |
| Well Name | Drumm Co 6 |
| Doc ID | 1140241 |

All Electric Logs Run

| Micro Log |
|-------------------------|
| Dual Induction Log |
| Compensated Nuetron Log |
| Geological Report |

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

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

June 04, 2013

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

Re: ACO1 API 15-065-23907-00-00 Drumm Co 6 NE/4 Sec.16-09S-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

No. 684/ Home Office P.O. Box 32 Russell, KS 67665 Phone 785-483-2025 Cell 785-324-1041

| 1003 | Sec. | Twp. | Range | County | State | On Location | Finish // | | | | | |
|--|--------------------------------------|------------------|--|--|--|---|---------------------------------------|--|--|--|--|--|
| Date 20-1 | 1.6 | 9 | 21 | Gently and | F15 | en en Bonnettaliana na |). (h 17-10) | | | | | |
| - Windsyl seing lond istory | 18 19 N | octes h | t as a rate of t | Location | SHO X BU | 15W 2 | FN | | | | | |
| Lease Lean MC | | 0.6183.1 | Well No. | Owner | | | | | | | | |
| Contractor | Ag your . | 151 138 | enco leges euro | To Quality Oil | To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish | | | | | | | |
| Type Job Pick To | 6 | 367 M. | Non-participation | cementer and | cementer and helper to assist owner or contractor to do work as listed. | | | | | | | |
| Hole Size | | T.D. | 3785 | Charge To | - forthere a | | | | | | | |
| Csg. 5h | (1) (2) (2) (3) And a common | Depth | CE DE DE TAL | Street | Inder FIUK | 10011 Ge | r I | | | | | |
| Tbg. Size | | Depth | 3784.7 | City | City State | | | | | | | |
| Tool | | Depth | s eksetatte darie | The above was | The above was done to satisfaction and supervision of owner a | | | | | | | |
| Cement Left in Csg. 76 | 1.46 | Shoe . | Joint 70.41 | Cement Amo | Cement Amount Ordered | | | | | | | |
| Meas Line | | Displa | ce 88.5 B | BL Setting | 140 Bel) | rit bu | 2008/01- | | | | | |
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QUALITY OILWELL CEMENTING, INC. Federal Tax 1.D.# 20-2886107

No. 6846

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

Phone 785-483-2025

| Cell 785-324-1041 | | | | | and the second | na presidentes | | | | |
|---|---|---|--|--|--|--|---|--|--|--|
| | Sec. | Twp. | Range | Taylor (| County | State | On Location | Finish | | |
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| Contractor Dutre 1 | J.B. MAL | 100 000 | tering and the | | To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish | | | | | |
| Type Job | | | nalities within you | | cementer and h | elper to assis | t owner or contractor I | to do work as listed. | | |
| Hole Size 12-44 | | T.D. | GT 4 COM | | Charge To | | - tria | | | |
| Csg. 19/02 | A MARCHAN | Depth | 1,613,625,679,7 | i soften a | Street | 1-1-1-1-1 | apart | A VSMARCTON | | |
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