

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1246854
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: _____

1246854



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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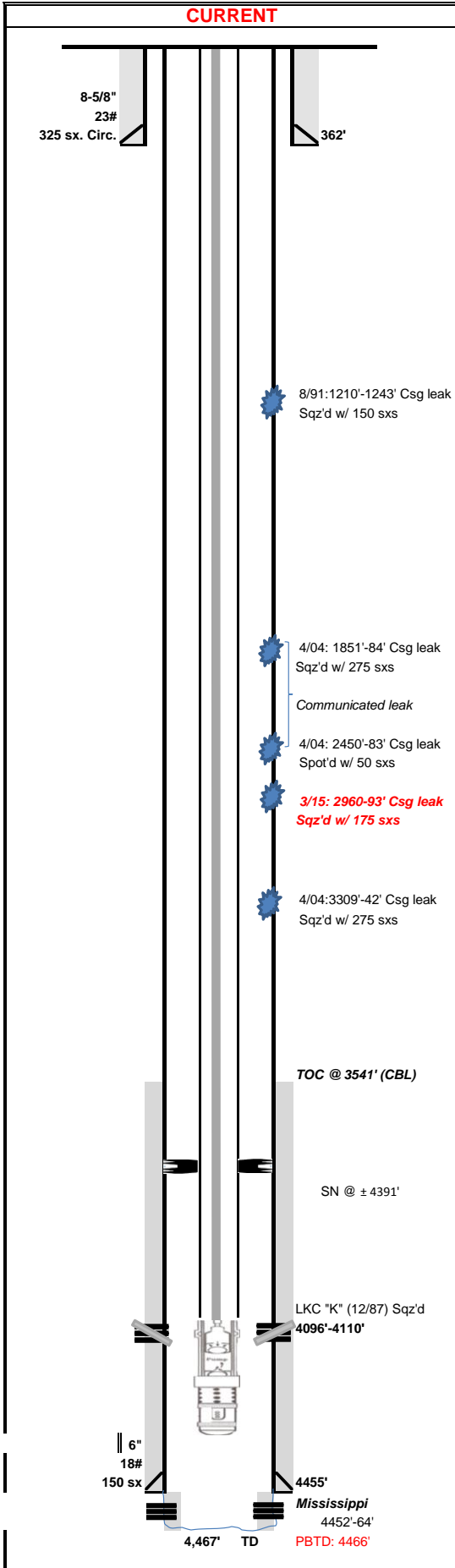
Form	ACO1 - Well Completion
Operator	Citation Oil & Gas Corp.
Well Name	THOMPSON 3
Doc ID	1246854

Tops

Name	Top	Datum
Stone Corral	1806	751
Stone Corral Bas	1838	719
Heebner	3796	-1239
Toronto	3817	-1260
Lansing	3840	-1283
Marmonton	4215	-1658
Fort Scott	4338	-1781
Cherokee	4363	-1806
Mississippian	4439	-1882

WELLBORE SCHEMATIC

CURRENT



Lease:	Thompson	Well No.:	3
API No.:	15-135-21435	Status:	Active
Location:	2310' FSL & 2970' FEL, NE NE SW. Sec 13 T18S R26W		
County:	Ness	State:	Kansas
Field:	Aldrich		
TD:	4467'	GL:	2552'
Spud Date:	3/6/1978		
PBTD:	4466'	KB:	2557'
Comp Date:	4/7/1978		
Current Perfs/OH:	4452'-4464'	Current Zone:	Mississippi

Surface Equipment

Unit Make:	Ideco	Unit Size:	S-221
Unit S/N:		Unit Rotation:	
SPM:	9.0	Stroke Length:	62"
Unit Sheave:		Motor Sheave:	
Prime Mover:	25 HP	Motor RPM:	
Motor S/N:			

Casing Breakdown

	Size	Grade / Wt	Depth	Hole Size	Cement
Surface	8-5/8"	23#	362'	12-1/4"	325 sx. Circ.
Production	6"	18#	4455'	7-7/8"	150 sx
Production					
Liner					

Tubing Breakdown

Qty	Description	Footage
139	2-7/8" Tbg	4391.01'
	SN	
1	CEMA	15.00'
	KB	5.00'
This well is not anchored due to csg leaks		
TOTAL		4406'

Rod Breakdown

Qty	Description	Footage
1	2-1/2" x 1-1/2" x 12' insert	12.00'
1	3/4" Pony rod	2.00'
110	3/4" rods	2750.00'
65	7/8"	1625.00'
1	7/8" pony rod	4.00'
1	7/8" pony rod	8.00'
	KB	5.00'
TOTAL		4406.00'

Comments

4/78 I.P 12 BO & 5 BW on pump.
 8/78: Due to wtr encroachment Sqz'd OH w/ 100 sxs Class A cmt. DO cmt 4430'-66'. Perf'd 4452'-64' @ 2 SPF
 12/87: Tested LKC "K 100% wtr. Sqz'd perfs.
 3/88: Set pkr at 4351' Pmp'd 50 sxs cmt. DO to 4462'. Perf'd 4456'-4458' w/ 3 holes. Ac'dz 1000 gal 15% NEFE tested 10 BOPD, 42 BWPD on pmp.
 8/91: Tested 4096-4110' to 400#. OK. Found csg leaks between 1210' -1243'. Sqz;d w/ 150 sxs.
 4/04: Isolated leak at 3309'-42'. Sqz'd w/ 275 sxs to 1000#
 Isolated leaks at 2450'-83' & 1851'-84' communicated. Spot 50 sxs at 2450' then w/ pkr at 1756' sqz w/ 275 sxs to 1500#. CO cmt to 4466'. Ac'dz perfs w/ 500 gal INS w/ 2% slvt.
 12/08: Stim'd w/ 425 gal 15% HCL
 03/15: Isolated csg leaks from 2960-93'. Sqz'd w/ 175 sxs common cmt w/ 3% CC
 Acidized w/ 750 gal 15% MCA w/ clay stabilizer

PREPARED BY: LMCV UPDATED: 3/23/2015