

1-135-16 W

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

COPY

API NO. 15- 051-24,297000

County Ellis

E/2 - NE - NE - NE Sec. 1 Twp. 13S Rge. 16 W

125 Feet from SN (circle one) Line of Section

125 Feet from EW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
AB, SE, NW or SW (circle one)

Lease Name Wieland Unit Well # 4-13

Field Name Fairport

REPRESSURED ~~Producing~~ Formation Topeka/Toronto/LKC

Elevation: Ground 1865 KB 1870

Total Depth 3400 PBD 3108

Amount of Surface Pipe Set and Cemented at 1802 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 cm

Drilling Fluid Management Plan REWORK 9/16-14-96 N/A
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bb

Dewatering method used _____

Location of fluid disposal if hauled off site _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ Rng. _____ E.

County _____ Docket No. _____

Operator: License # 03553

Name: Citation Oil & Gas Corp.

Address 8223 Willow Place South Ste 250

City/State/Zip Houston, Texas 77070

Purchaser: _____

Operator Contact Person: Sharon Ward

Phone (713) 469-9664

Contractor: Name: N/A

License: _____

Wellsite Geologist: N/A

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: Tenneco Oil Company

Well Name: Wieland Unit 4-13

Comp. Date 9-16-85 Old Total Depth 3400

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. E 10416

9-10-85 9-15-85 9-16-85

Spud Date 5-3-96 Date Reached TD 5-3-96 Completion Date 5-3-96

START OF WORKOVER

OF WORKOVER

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature Sharon Ward

Title Regulatory Administrator Date 6-7-96

Subscribed and sworn to before me this 7th day of June, 19 96.

Notary Public Renee Harrell

Date Commission Expires 3-2-99

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input checked="" type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other
(Specify)		



Operator Name Citation Oil & Gas Corp.

Lease Name Wieland Unit

Well # 4-13 771841

East
 West

County Ellis

Sec. 1 Twp. 13S Rge. 16

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheets if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Shale, Shell & lime	0	770
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Shale & lime	770	974
List All E.Logs Run:		Lime & shale	974	1006
		Lime, shale, red bed	1006	1573
		Lime & shale	1573	3400

CASING RECORD <input checked="" 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
Surface	12 1/4	8 5/8	24	1802	Lite	600 sx	3/4%CFR2, 1/8%gel 3%cc, 2%gel
					Common	350 sx	1/4# cello/sx
Production	7 7/8	5 1/2	15.5	3399	surefill	195 sx	

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives	
<input checked="" type="checkbox"/> Perforate					
<input type="checkbox"/> Protect Casing					
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)		Depth
	4 spf	2919-2948		15% FE HCl	
4 spf	2976-3053		1600 gal 15% MCA	2976-3053	

TUBING RECORD		Size <u>2 3/8</u>	Set At <u>3089.79'</u>	Packer At <u>2863.78'</u> <u>2969.18'</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Date of First, Resumed Production, SWD or Inj.		Producing Method		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
<u>5-3-96</u>		<u>Injecting</u>					
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water Bbls.	Gas-Oil Ratio	Efficiency

Disposition of Gas: Vented Sold Used on-Lease Open Hole Perf. Dually Comp. Commingled Injection

(If vented, submit ACO-18.)

METHOD OF COMPLETION: 2919-3053