

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

Operator: License # 03553Name: Citation Oil & Gas Corp.Address 8223 Willow Place South Ste 250Houston, Texas 77070

City/State/Zip _____

Purchaser: Plains Liquids TransportationOperator Contact Person: Sharon WardPhone (713) 469-9664Contractor: Name: N/ALicense: N/AWellsite Geologist: N/A

Designate Type of Completion

 New Well Re-Entry X Workover X Oil SWD SLOW Temp. Abd. Gas ENHR SIGW Dry Other (Core, WSW, Expl., Cathodic, etc)

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

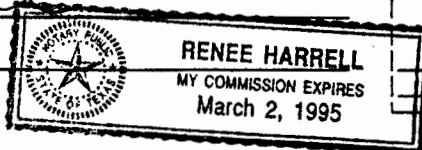
Operator: Tenneco Oil Co.Well Name: Sandrock Unit C-4Comp. Date 10-25-79 Old Total Depth 3565 Deepening X Re-perf. Conv. to Inj/SWD X Plug Back 3416' PBTD Commingled Docket No. _____ Dual Completion Docket No. _____ Other (SWD or Inj?) Docket No. _____

10-21-94 N/A 10-25-94
~~SPUD~~ Date OF START Date Reached TD Completion Date OF
 OF WORKOVER WORKOVER

API NO. 15- 009-217330001County BartonNE - SW - NW - Sec. 27 Twp. 20 Rge. 13 X1650 Feet from S (circle one) Line of Section990 Feet from E (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)Lease Name Sandrock Unit Well # C-4Field Name Sandrock FieldProducing Formation LKCElevation: Ground 1880' KB 1887Total Depth 3564' PBTD 3416Amount of Surface Pipe Set and Cemented at 309 FMultiple Stage Cementing Collar Used? Yes X If yes, show depth set FIf Alternate II completion, cement circulated from feet depth to w/ sx caDrilling Fluid Management Plan REWORK 9/4 6-27-95
(Data must be collected from the Reserve Pit) N/AChloride content ppm Fluid volume blDewatering method used Location of fluid disposal if hauled offsite: Operator Name Lease Name License No. Quarter Sec. Twp. S Rng. E/County Docket No.

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado 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 TICKET 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 WardTitle Prod. Reg. Supv. Date 12-12-94Subscribed and sworn to before me this 12th day of December, 19 94.Notary Public Renee HarrellDate Commission Expires 3-2-95

| K.C.C. OFFICE USE ONLY | |
|--|------------------------------------|
| F | Letter of Confidentiality Attached |
| C | Wireline Log Received |
| C | Geologist Report Received |
| <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> KCC <input type="checkbox"/> KGS </div> <div> <input checked="" type="checkbox"/> Distribution <input type="checkbox"/> SWD/Rep <input type="checkbox"/> Plug <input type="checkbox"/> NGPA <input type="checkbox"/> Other (Specify) </div> </div> | |
| DEC 15 1994 | |

Operator Name Citation Oil & Gas Corp.Lease Name Sandrock UnitWell # C-4Sec. 27 Twp. 20 Rge. 13☐ East☒ WestCounty Barton

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 sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken ☐ Yes ☒ No
(Attach Additional Sheets.)Samples Sent to Geological Survey ☐ Yes ☒ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☐ Yes ☒ No
(Submit Copy.)List All E.Logs Run: None☐ Log Formation (Top), Depth and Datums ☐ Sample

Name Top Datum

LKC A2 3250

LKC A3 3262

LKC C2 3299

LKC D1 3316

LKC D2 3326

CASING RECORD

N/A

☐ New ☐ 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 | 309 | Class H | 225 | 2% Gel 3% C |
| Production | 7 7/8 | 5 1/2 | 15.5 | 3564 | RFC | 225 | 10# Kolite, 3/4% D-6, 2% D-46, w/500# mud |

ADDITIONAL CEMENTING/SQUEEZE RECORD

| Purpose: | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
|--|------------------|----------------|-------------|---------------------------------------|
| Perforate | 3460 - | | 2 sx cmt | 20 gal coarse sand & gravel, 2 sx cal |
| <input checked="" type="checkbox"/> Protect Casing | 3416 | | 2 sx cmt | seal on top of sand |
| <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 | 3250-56, 3262-68, 3299-3304, 3316-20, 3326-30 | Acidized w/1700 gal 15% NEFE 3250-30 + 1 gal/1000 gal clay stabilizer 3332-80 |
| | | |
| | | |
| | | |

| TUBING RECORD | Size | Set At | Packer At | Liner Run | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|-----------------------------------|-------------|------------------|---|---------------|---|
| | 2 7/8" | 3401 | SN @ 3398 | | |
| Date of First, Resumed Production | SWD or Inj. | Producing Method | <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | |
| 10-26-94 | | | | | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
| | 5 | 0 | 262 | - | - |

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, submit ACO-18.)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____

3250 - 3403