

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008

Form Must Be Typed

3/2/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3553

Name: Citation Oil & Gas Corp.

Address 1: P O Box 690688

Address 2: _____

City: Houston State: TX Zip: 77269 + 0688

Contact Person: Bridget Lisenbe

Phone: (281) 891-1565

CONTRACTOR: License # 5929 **KCC**

Name: Duke Drilling **MAR 02 2010**

Wellsite Geologist: _____ **CONFIDENTIAL**

Purchaser: _____

Designate Type of Completion:

- New Well _____ Re-Entry _____ Workover _____
- Oil _____ SWD _____ SLOW _____
- _____ Gas _____ ENHR _____ SIGW _____
- _____ CM (Coal Bed Methane) _____ Temp. Abd. _____
- _____ Dry _____ Other _____
(Core, WSW, Expl., Cathodic, 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: _____ Plug Back Total Depth _____

_____ Commingled _____ Docket No.: _____

_____ Dual Completion _____ Docket No.: _____

_____ Other (SWD or Enhr.?) _____ Docket No.: _____

1/16/2010 1/21/2010 2/17/2010

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

API No. 15 - 051-25935 -0000

Spot Description: _____

SE NE SE Sec. 1 Twp. 13 S. R. 16 East West

1650 Feet from North / South Line of Section

330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Ellis

Lease Name: Wieland Well #: 6-15

Field Name: Fairport

Producing Formation: LKC and Topeka

Elevation: Ground: 1895 Kelly Bushing: 1903

Total Depth: 3445 Plug Back Total Depth: 3361

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: 0 ppm Fluid volume: 0 bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 of 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: Bridget Lisenbe

Title: Permitting Analyst Date: 3/2/2010

Subscribed and sworn to before me this 2nd day of march

20 10

Notary Public: Nathanial R. Naftaly

Date Commission Expires: 3-22-2012

KCC Office Use ONLY

Y Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

_____ Geologist Report Received

_____ UIC Distribution

