SIDE ONE

7 Amended	
STATE CORPORATION COMMISSION OF KANSAS	API NO. 15- 34
OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM	County ELLIS
ACO-2 AMENDMENT TO WELL HISTORY	East NE NW NE Sec 1 Twp 13 Rge 16 X West
02552	
Operator: License # U3003	4890 Ft North from Southeast Corner of Section
Name <u>Citation Oil & Gas Corp.</u> Address <u>16800 Greenspoint Pk.Dr.#300 South</u>	(Note: Locate well in section plat below)
City/State/Zip Houston, Texas 77060	Lease Name Wieland Unit Well # 5-2
City/State/Zip houston, lexas //ood	
Purchaser Phillips 66	Fleid Name
Operator Contact Person Sharon Evans	Name of New Formation Well-stayed in Toronto/Topeka Lower Kansas
Phone (713) 874-9877	Elevation: Ground 1889' KB
Designate Type of Original Completion	Section Plat
New Well Re-Entry _X Workover	5280
X OII SWD Temp Abd	4950 4620
Gas Inj Delayed Comp.	4290 3960
Other (Core, Water Supply etc.)	RECEIVED 3630 3300 2970
Dry Other (Core, Water Supply etc.) Date of Original Completion: 5-22-34 STATE OF RECOMPLETION:	12970 2640
STATE	7 1980
10-4-88 10-25-88	1320 990 660 330
Commenced Completed	CONSERVATION 6600 330
Designate Type of Recompletion/Workover:	2288 4 4288 4 4289 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
χ Deepening Delayed Completion	
Plug Back X Re-perforation	K.C.C. OFFICE USE ONLY
Conversion to injection/Disposal	F Letter of Confidentiality Attached
	CDrillers Timelog Received
Is recompleted production: N/A	Distribution KCC SWD/Rep NGPA
Commingled; Docket No.	KGS Plug Other
Dual Completion; Docket No.	(Spec1fy)
Other (Disposal or Injection)?	1(-7-88
Other (Disposal of Injection)?	1 7-88
INSTRUCTIONS: This form shall be completed in trip	olicate and filed with the Kansas Corporation Commission,
200 Colorado Derby Building, Wichita, Kansas 67202,	within 120 days of the recompletion of any well. Rules
	vo of this form will be held confidential for a period of the form. See rule 82-3-107 for confidentiality in
excess of 12 months. One copy of any additiona	I wireline logs and driller's time logs (not previously
	t ACO-4 prior to or with this form for approval of hall plugged wells. Submit CP-111 with all temporarily
	disposal or injection <u>must</u> receive approval before use;
submit form U-1.	
All requirements of the statutes, rules and regulati	ons promulgated to regulate the oll and gas industry have
been fully complied with and the statements herein ar	e complete and correct to the best of my knowledge.
≤ 0	
Signature March Charlo T	Itle Prod. Admin. Assistant Date 11/2/88
Subscribed and sworn to before me this 2nd d	ay of November 19 88
Notary Public Kine Harrell Renee! Harrell	Date Commission Expires 3-2-91
nonce nation	

erator Name <u>Citation Oil & Gas Corp.</u>		Lease Na	Lease Name Wieland Unit Well # 5-			
c <u>1</u> Twp	13Rge16	East X West	County _	Ellis		
		•				
	RE COM	PLETED FORMAT				
		Log	Sam	nple		
	Name			Тор	<u>Bottom</u>	
						•
	•			•		
	·					
	ADD	ITIONAL CEMEN	TING/SQUEEZ	ZE RECORD		
Purpose:	Depth Top Bottom	Type of C	ement	# Sacks Used	Type & Percent Addi	tives
Perforate .	None		· · · · · · · · · · · · · · · · · · ·		İ	
Protect Casing Plug Back TD	11			<u> </u>		
Plug Off Zone						
	PERFORATION RECOR	D				
Shots Per Foot	Specify Footage of Interval Perforat	•	Acid, F	racture, Shot, C Amount and Kind	ement Squeeze Record of Material Used)	
4 SPF	3012'- 3270'	Acid	treated	w/100 gal pe	er foot 15% FE aci	d
4 SPF	2922'- 2988'	Acid	treated	w/100 gal pe	r foot 15% FE w/a	dditiv
} }					·	
то <u>3230'</u>	Plug Type <u>CIBP</u>		-			
			RECORD:	. narra	V	
				3166' Was	Liner Run? X Y	
ite of Resumed Prod	uction, Disposal or 1			•		
stimated Production	Per 24 Hours			bb1		
			MCF gas	gas	-oil ratio	