

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
Name: Duke Drilling
Wellsite Geologist: _____

Purchaser: _____
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 Dry Other _____
(Core, WSW, 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: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____
1/23/2010 1/27/2010 2/24/2010
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 051-25934 -0000
Spot Description: _____
NW SE SE Sec. 1 Twp. 13 S. R. 16 East West
990 Feet from North / South Line of Section
990 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis
Lease Name: Wieland Well #: 6-16
Field Name: Fairport

Producing Formation: LKC and Topeka
Elevation: Ground: 1868 Kelly Bushing: 1876
Total Depth: 3420 Plug Back Total Depth: 3335
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 ATINS 3870
(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.: _____

RECEIVED
KANSAS CORPORATION COMMISSION
MAR 05 2010
3-5-10
CONSERVATION DIVISION
WICHITA, KS
KCC
MAR 02 2010

CONFIDENTIAL

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
2010
Notary Public: Nathanie R. Naftaly
Date Commission Expires: 3-22-2013

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



Operator Name: Citation Oil & Gas Corp. Lease Name: Wieland Well #: 6-16
 Spc. 1 Twp. 13 S. R. 16 East West County: Ellis

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Compensated Porosity Log, Microresistivity Log, Dual Induction Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	987'		500	
Production	7 7/8"	5 1/2"	15.5	3487'		200	

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				

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	LKC (3087-3348)	8450 gals 15% NeFe	3087-3348
4	Toronto (3057-3062)	750 gals 15% NeFe	3057-3062
4	Topeka (2996-3026)	3300 gals 15% NeFe	2996-3026

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>3082</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First. Resumed Production, SWD or Enhr. <u>2/24/2010</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. <u>19</u>	Gas Mcf <u>0</u> Water Bbls. <u>453</u> 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>LKC, Toronto & Topeka</u>
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ALLIED CEMENTING CO., LLC. "056326"

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

KCC

SERVICE POINT:

Russell

MAR 02 2010

DATE <i>1-24-10</i>	SEC. <i>1</i>	TWP. <i>135</i>	RANGE <i>16 W</i>	ON LOCATION	JOB START <i>11:15 AM</i>	JOB FINISH <i>12:15 PM</i>	
LEASE <i>Wagon</i>				WELL # <i>6-16</i>	LOCATION <i>Hay 40 Corbin Ks 1W</i>	COUNTY <i>Ellis</i>	STATE <i>Ks</i>
OLD OR NEW (Circle one)			<i>6 N W. to</i>				

CONTRACTOR *Duke Drilling Rig # 2*

TYPE OF JOB *Service Sub*

HOLE SIZE *8 1/2"* T.D. *1000*

CASING SIZE *8 1/8"* DEPTH *991*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT *70'*

CEMENT LEFT IN CSG. *70'*

PERFS.

DISPLACEMENT *78.52 bbl*

OWNER _____

CEMENT

AMOUNT ORDERED *500 Cms 32.00*

29.50

EQUIPMENT

PUMP TRUCK CEMENTER *Shane P.*

417 HELPER *Matt D.*

BULK TRUCK

477 187 DRIVER *RON B*

BULK TRUCK

DRIVER

COMMON @ _____

POZMIX @ _____

GEL @ _____

CHLORIDE @ _____

ASC @ _____

RECEIVED
KANSAS CORPORATION
MAR 05 2010
CONSERVATION
WICHTALING

HANDLING @ _____

MILEAGE @ _____

REMARKS:

*R up Tubing to 8 1/8 Est
Circulation Mixed 500 SK
St. volume Released Plug Displaced
58.52 bbl Time 915*

Cement Circulated

Flow Hold.

CHARGE TO: *C. Station Oil Gas*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

MANIFOLD @ _____

@ _____

@ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

8 1/8 Plug @

6 - Central @

1/2 AFU - Insert @

@ _____

@ _____

TOTAL _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

SIGNATURE *[Signature]*

Thanks!

