



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

Form Must Be Typed Form must be Signed All blanks must be Filled

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3553 Name: Citation Oil & Gas Corp. Address 1: 14077 Cutten Rd Address 2: PO BOX 690688 City: HOUSTON State: TX Zip: 77269 + 0688 Contact Person: Tami Troxel Phone: (281) 891-1564 CONTRACTOR: License # 5929 Name: Duke Drilling Co., Inc. Wellsite Geologist: Ed Glassman Purchaser:

Designate Type of Completion: [X] New Well [ ] Re-Entry [ ] Workover [X] Oil [ ] WSW [ ] SWD [ ] SIOW [ ] Gas [ ] D&A [ ] ENHR [ ] SIGW [ ] OG [ ] GSW [ ] Temp. Abd. [ ] CM (Coal Bed Methane) [ ] Cathodic [ ] Other (Core, 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 [ ] Conv. to GSW [ ] Plug Back: Plug Back Total Depth: [ ] Commingled Permit #: [ ] Dual Completion Permit #: [ ] SWD Permit #: [ ] ENHR Permit #: [ ] GSW Permit #:

12/05/2012 12/11/2012 12/29/2012 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-163-24089-00-00 Spot Description: NW SE SE Sec. 2 Twp. 9 S. R. 19 East [X] West [ ] 990 Feet from [ ] North / [X] South Line of Section 990 Feet from [X] East / [ ] West Line of Section

Footages Calculated from Nearest Outside Section Corner: [ ] NE [ ] NW [X] SE [ ] SW

County: Rooks Lease Name: Dan Barry A Well #: 25

Field Name: Barry Field

Producing Formation: Arbuckle

Elevation: Ground: 2010 Kelly Bushing: 2018

Total Depth: 3485 Plug Back Total Depth: 3465

Amount of Surface Pipe Set and Cemented at: 1402 Feet

Multiple Stage Cementing Collar Used? [ ] Yes [X] 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: 18400 ppm Fluid volume: 750 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

Quarter Sec. Twp. S. R. East West

County: Permit #:

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

[X] Letter of Confidentiality Received Date: 01/16/2013 [ ] Confidential Release Date: [X] Wireline Log Received [ ] Geologist Report Received [ ] UIC Distribution ALT [X] I [ ] II [ ] III Approved by: NAOMI JAMES Date: 01/17/2013