

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
ACO-2 AMENDMENT TO WELL HISTORY

Operator: License # 03553
Name Citation Oil & Gas Corp.
Address 16800 Greenspoint Pk. Dr. #300 S
City/State/Zip Houston, TX 77060

Purchaser Permian

Operator Contact Person Sharon Evans
Phone 713-874-9877

Designate Type of Original Completion
 New Well Re-Entry Workover

Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

Date of Original Completion: N/A

DATE OF RECOMPLETION:
12-3-88 12-5-88
Commenced Completed

Designate Type of Recompletion/Workover:
 Deepening Delayed Completion
 Plug Back Re-perforation
 Conversion to Injection/Disposal

Is recompleted production:
 No Commingled; Docket No. _____
 No Dual Completion; Docket No. _____
 No Other (Disposal or Injection)?

API NO. 15- 61
County Pratt KC-A
C SW SW SE Sec 28 Twp 29 Rge 13 East West

330' Ft North from Southeast Corner of Section
2310' Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

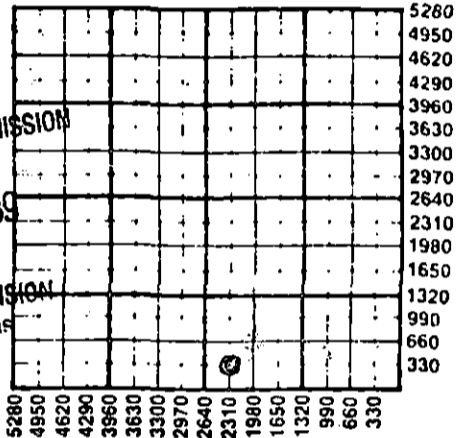
Lease Name Moore Well # 1

Field Name Jem

Name of New Formation Recomplete to Lower Viola

Elevation: Ground 1884' KB 1889'
Section Plat

RECEIVED
STATE CORPORATION COMMISSION
JAN 9 1989
01-09-89
CONSERVATION DIVISION
Wichita, Kansas



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)
.....
.....
1-9-89 NA

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 prior to or with this form for approval of commingling or dual completions. Submit CP-4 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

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 Evans Title Prod. Admin. Assistant Date 1-6-89
Subscribed and sworn to before me this 6th day of January 19 89
Notary Public Renee Harrell Date Commission Expires 3-2-91

Operator Name Citation Oil & Gas Corp. Lease Name Moore Well # 1

Sec 28 Twp 29s Rge 13 East West County Pratt

RECOMPLETED FORMATION DESCRIPTION:

Log Sample

Name Top Bottom

Handwritten notes:
 12-15-88
 12-15-88
 12-15-88

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
Perforate	None				
Protect Casing	"				
Plug Back TD	"				
Plug Off Zone	"				

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shof, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)
4 SPF	4411' - 4388'	Acid treated w/2000 gal 15% FE acid. Displ'd
2 SPF	4510' - 4520'	w/19 bbls 2% KCL.
		N/A

*Existing perfs @ 4474' - 4488'

PBTD 4640' Plug Type N/A

TUBING RECORD:

Size 2 3/8" Set At 4529' Packer At _____ Was Liner Run? Y X N

Date of Resumed Production, Disposal or Injection 12-8-88

Estimated Production Per 24 Hours 38 bbl/oil 18 bbl/water

 MCF gas gas-oil ratio