



WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- ☐ New Well ☐ Re-Entry ☐ Workover
☐ 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
☐ Plug Back ☐ Conv. to GSW ☐ Conv. to Producer

☐ Commingled Permit #: _____
☐ Dual Completion Permit #: _____
☐ SWD Permit #: _____
☐ ENHR Permit #: _____
☐ GSW Permit #: _____

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No. 15 - _____

Spot Description: _____

_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West_____-_____-_____- Feet from ☐ North / ☐ South Line of Section_____-_____-_____- Feet from ☐ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☐ SW
GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

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: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

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

☐ Confidentiality Requested

Date: _____

☐ Confidential Release Date: _____☐ Wireline Log Received☐ Geologist Report Received☐ UIC DistributionALT ☐ I ☐ II ☐ III Approved by: _____ Date: _____

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample
Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No	Name Top Datum
Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No	
Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No	
List All E. Logs Run:	

CASING RECORD <input 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
____ Perforate				
____ Protect Casing				
____ Plug Back TD				
____ Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? ☐ Yes ☐ No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? ☐ Yes ☐ No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? ☐ Yes ☐ No *(If No, fill out Page Three of the ACO-1)*

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Citation Oil & Gas Corp.
Well Name	Wieland 5-5
Doc ID	1086228

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives

Summary of Changes

Lease Name and Number: Wieland 5-5

API/Permit #: 15-051-04990-00-02

Doc ID: 1086228

Correction Number: 1

Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved By	NAOMI JAMES	Karen Ritter
Approved Date	07/02/2012	12/14/2016
Confidential Release Date	06/28/2014	
Fracturing Question 1		No
LocationInfoLink	https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=1&to.../kcc/detail/operatorEditDetail.cfm?docID=1086038	https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=1&to.../kcc/detail/operatorEditDetail.cfm?docID=1086228
Save Link		
Tubing Size	2 /38	2.375

Form	ACO1 - Well Completion
Operator	Citation Oil & Gas Corp.
Well Name	Wieland 5-5
Doc ID	1086038

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives

WELLBORE SCHEMATIC

Current		Lease: Wieland	Well No. 5-5																														
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>12-1/4" HOLE</p> <p>8 5/8"</p> <p>NA / 28#</p> <p>450 sx</p> <p>983'</p> <p>TOC: 2400' (Est)</p> <p>7-7/8" HOLE</p> </div> <div style="width: 50%;"> <p>3325'</p> <p>3105'</p> <p>3314'</p> <p>3321'</p> <p>TD</p> <p>O.H. (3307-3321)</p> <p>TD (Logger)</p> </div> </div>		API No. 051-24-335	Status AI																														
		Location: NW NE Sec.1, T-13S, R-16W																															
		County: Ellis	State: KS	Field: Fairport																													
		TD 3325'	GL 1909'	Spud Date: 9/1/1949																													
		PBTD 3105'	KB 1913'	Comp Date: 9/14/1949																													
		Current Perfs/OH:																															
		Current Zone:																															
		Surface Equipment Unit Make: Unit Size: Unit S/N: Unit Rotation: SPM: Stroke Length: Unit Sheave: Prime Mover: Motor Sheave: Motor S/N: Motor RPM:																															
		Casing Breakdown <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Size</th> <th>Grade / Wt</th> <th>Depth</th> <th>Cement</th> </tr> </thead> <tbody> <tr> <td>Surface</td> <td>8 5/8"</td> <td>NA / 28#</td> <td>983'</td> <td>450 sx</td> </tr> <tr> <td>Production</td> <td>5 1/2"</td> <td>NA / 17#</td> <td>3314'</td> <td>150 sx</td> </tr> <tr> <td>Production</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Production</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Liner</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Size	Grade / Wt	Depth	Cement	Surface	8 5/8"	NA / 28#	983'	450 sx	Production	5 1/2"	NA / 17#	3314'	150 sx	Production					Production					Liner				
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Comments 3084-3090 (4 spf); 2963-2969 (4 spf); 3012-3016 (2spf); 3045-3051 (2spf); 3068-3074 (2spf) (8/89) LD Ing Tbg, KO CIBP drill cmnt plug f/ 3275-3319'																																	
PREPARED BY: AL UPDATED: 8/4/2011																																	

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All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

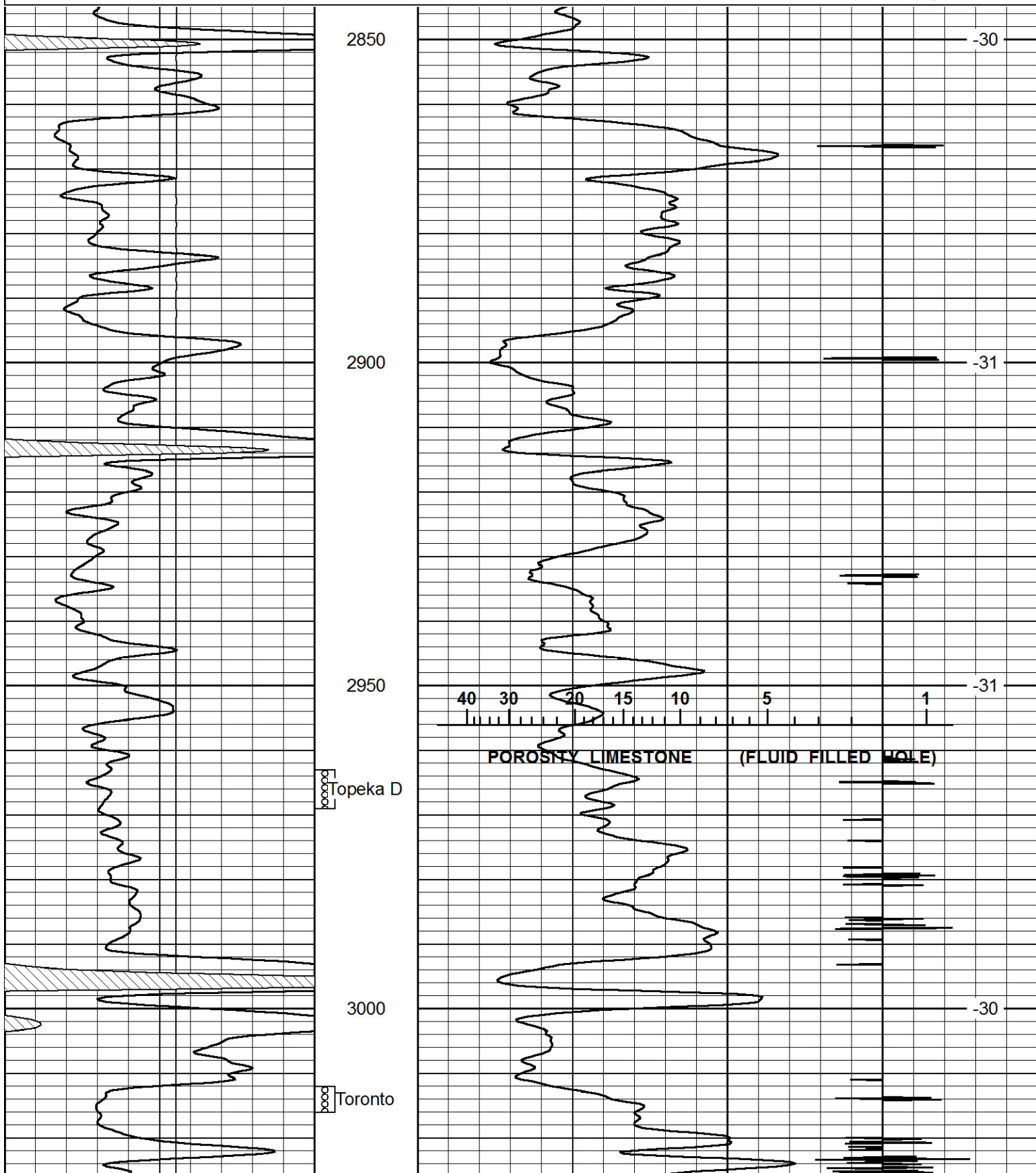
Comments

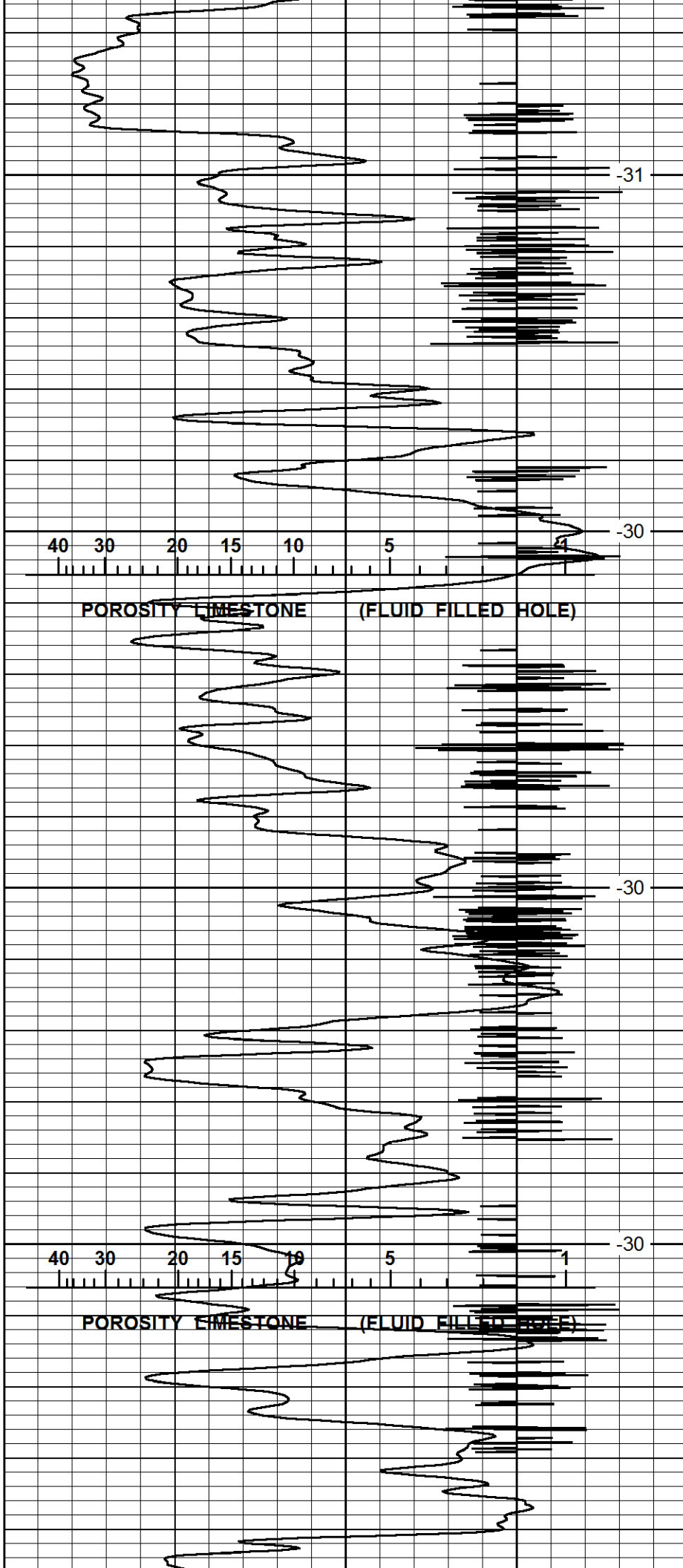
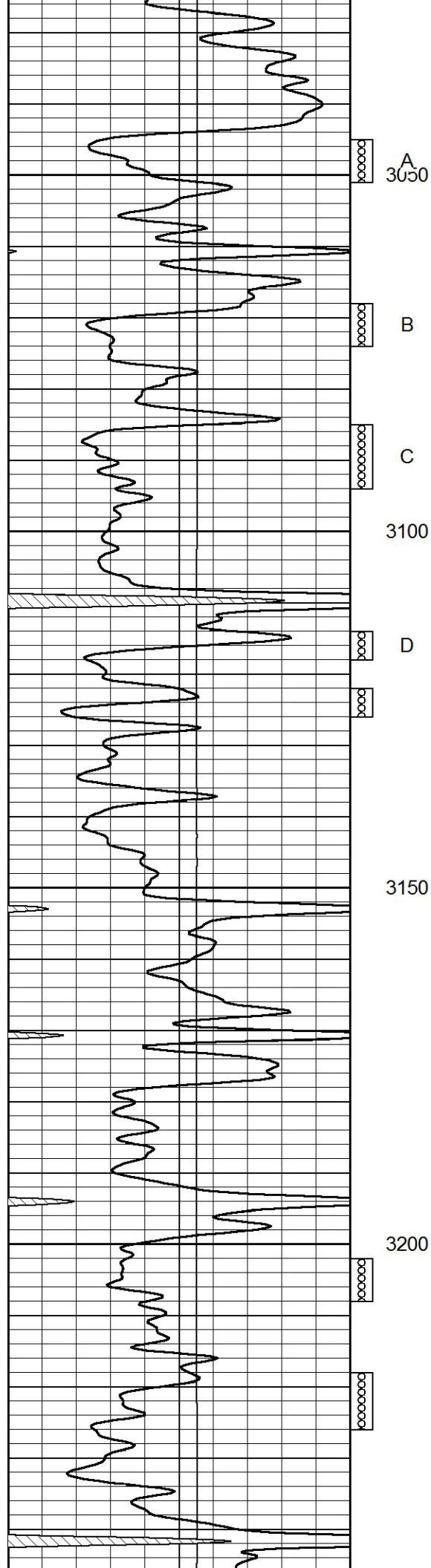
Thank you for using Log-Tech, Inc.
(785) 625-3858

Gorham ks.
4 3/4 N, W into
@ yard

Database File: citation_grn.db
Dataset Pathname: grn/pass5.1
Presentation Format: gr-ccl
Dataset Creation: Thu May 24 12:03:51 2012 by Calc SCH 110223
Charted by: Depth in Feet scaled 1:240

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2000	Iten (lb)	0	2	Casing Collars	-2
				LSPD (ft/min)	



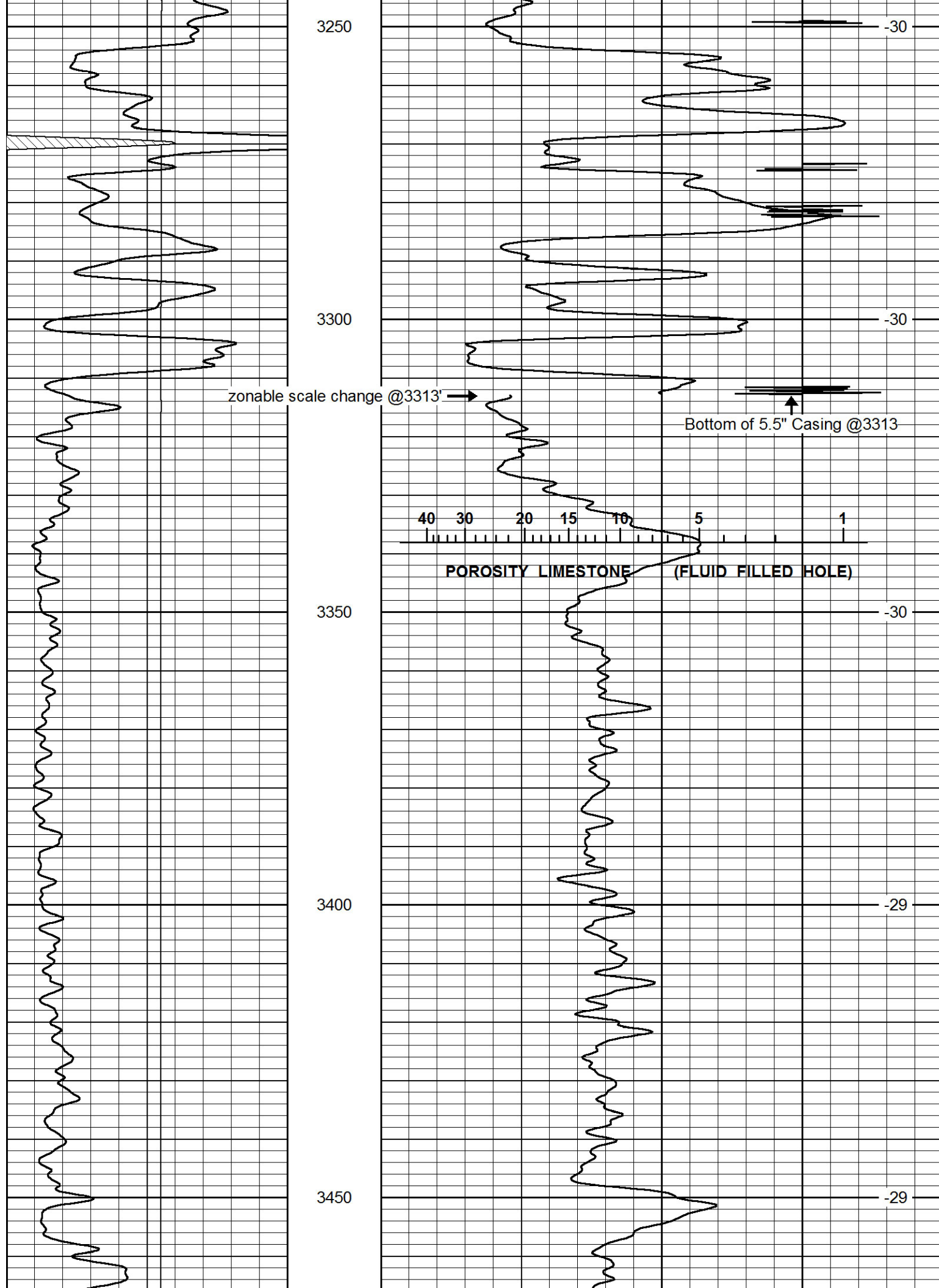


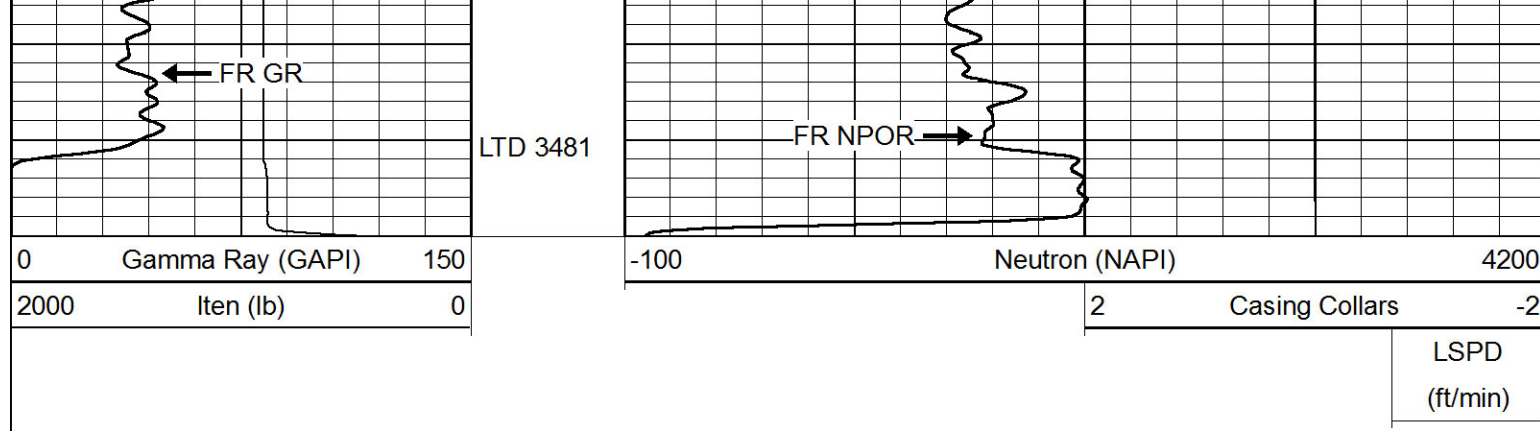
40 30 20 15 10 5

POROSITY LIMESTONE (FLUID FILLED HOLE)

40 30 20 15 10 5 1

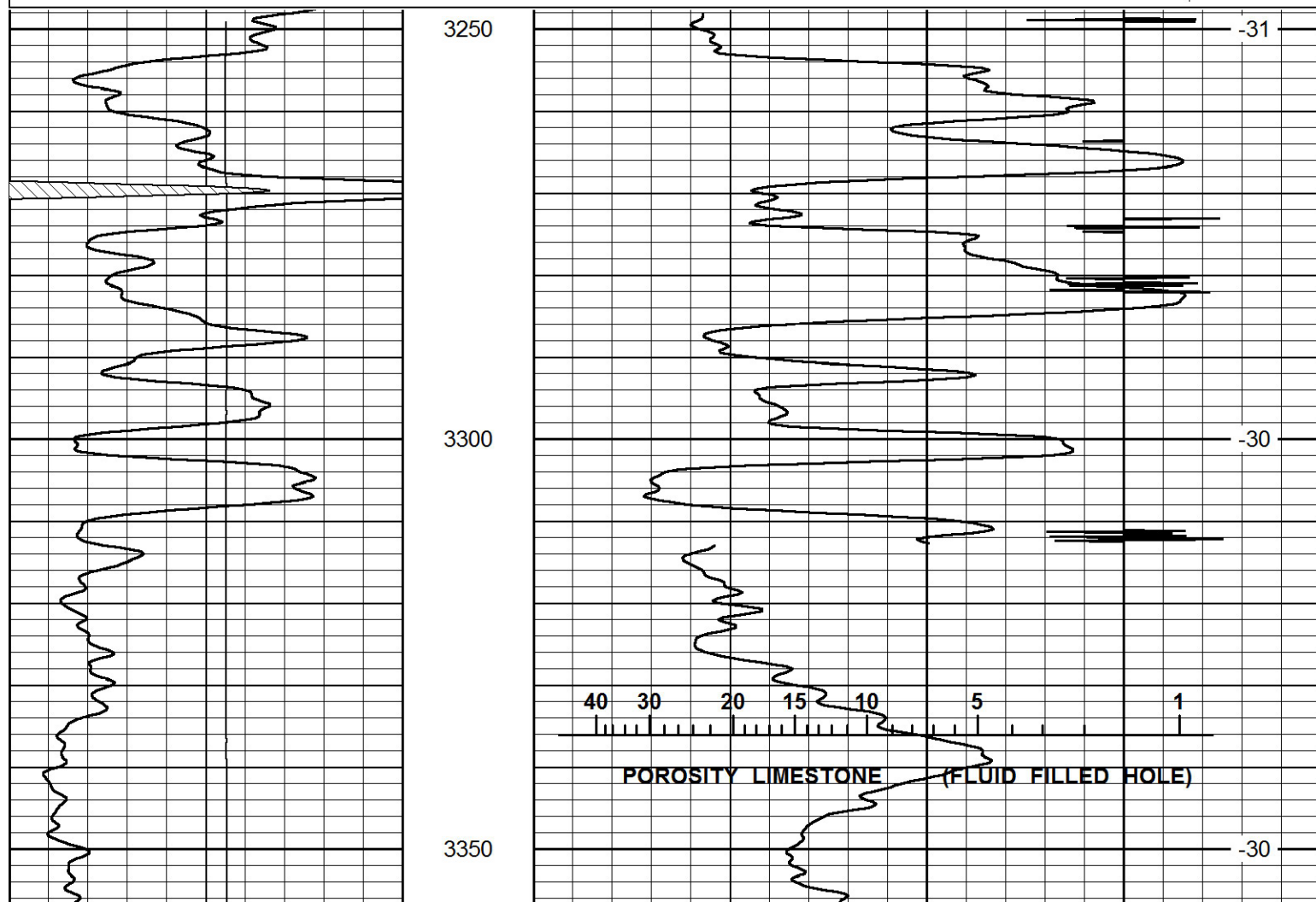
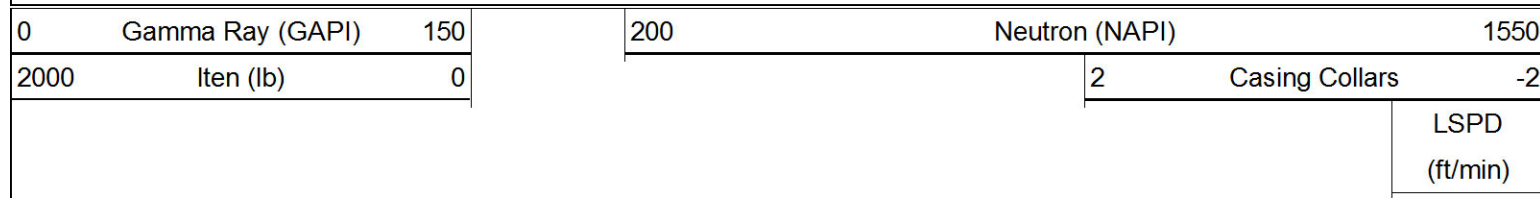
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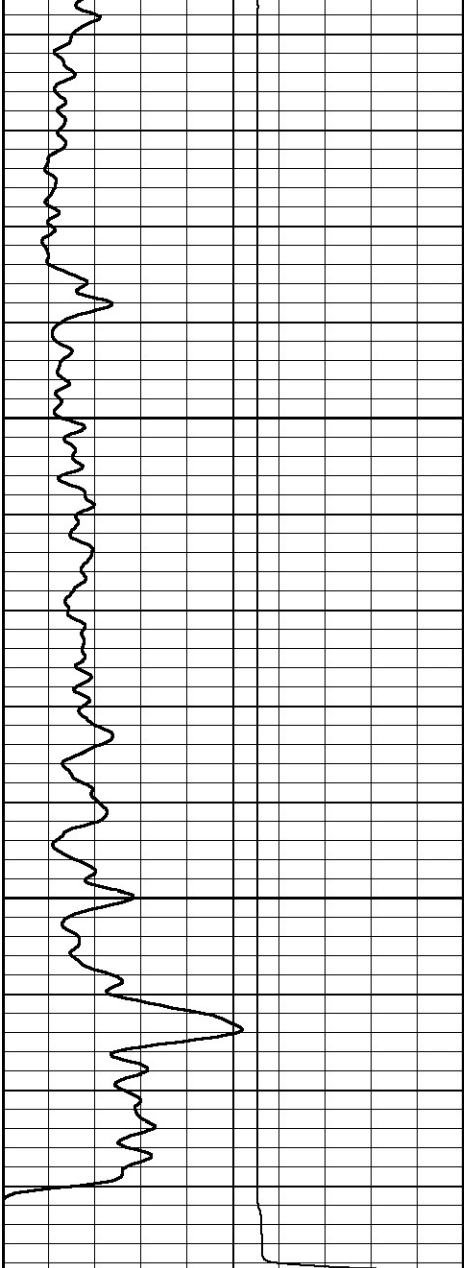




Repeat Section

Database File: citation_grn.db
 Dataset Pathname: grn/pass3.1
 Presentation Format: gr-ccl
 Dataset Creation: Thu May 24 11:48:30 2012 by Calc SCH 110223
 Charted by: Depth in Feet scaled 1:240

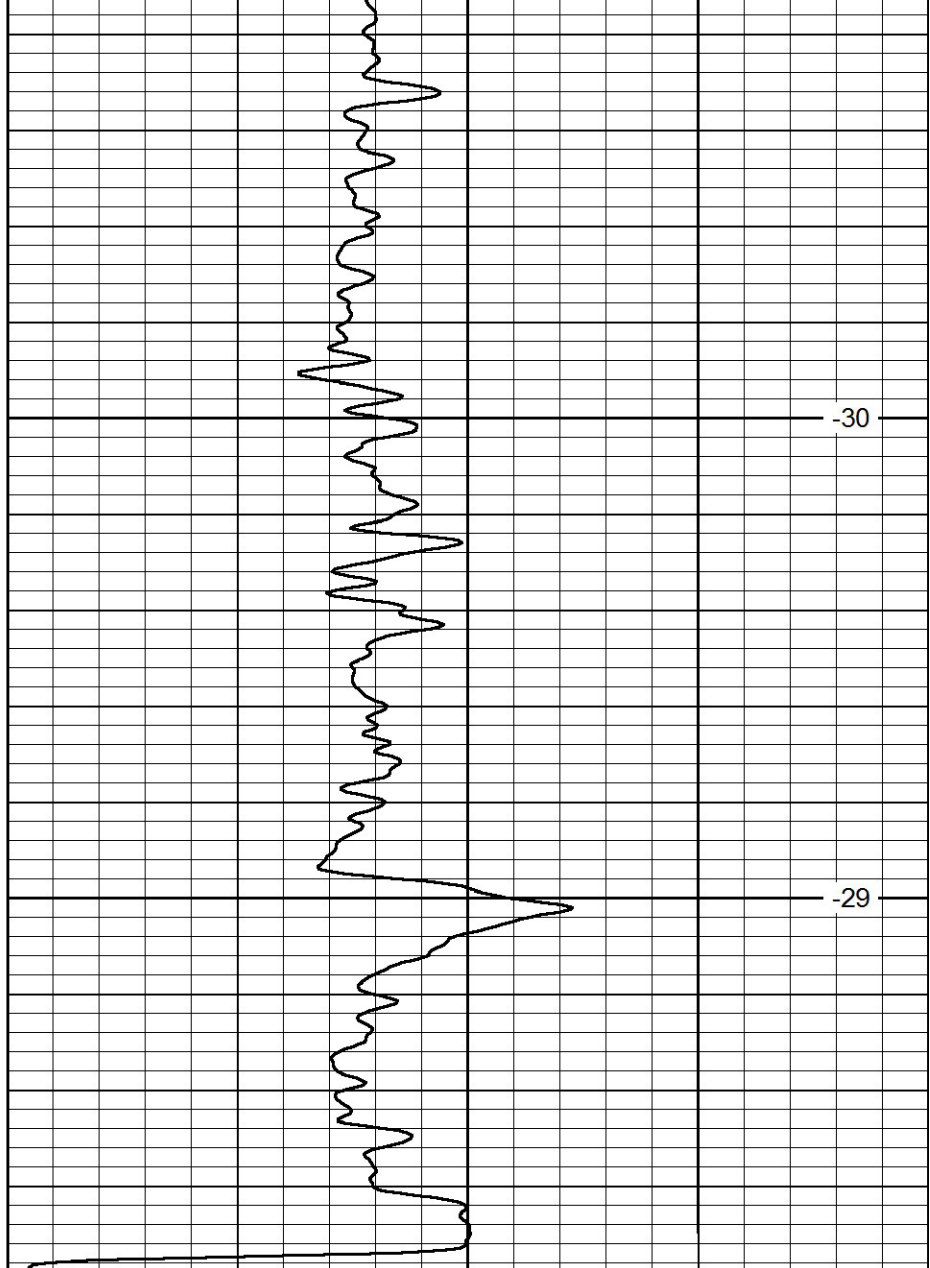




0	Gamma Ray (GAPI)	150
2000	Iten (lb)	0

3400

3450



-100	Neutron (NAPI)	4200
2	Casing Collars	-2

-30

-29

LSPD (ft/min)

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

June 28, 2012

Kimberly Moorhead
Citation Oil & Gas Corp.
14077 Cutten Rd
PO BOX 690688
HOUSTON, TX 77269-0688

Re: ACO1
API 15-051-04990-00-02
Wieland 5-5
NE/4 Sec.01-13S-16W
Ellis County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Kimberly Moorhead