

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1069206

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
	Field Name:
Wellsite Geologist:	
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
	Amount of Surface Pipe Set and Cemented at: Feel
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used?
□ OG □ GSW □ Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Chloride content: ppm Fluid volume: bbls
	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec TwpS. R East West
GSW Permit #:	County: Permit #:
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date	

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
Letter of Confidentiality Received
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

	Side Two	1069206
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets) Samples Sent to Geological Survey Cores Taken Electric Log Run Electric Log Submitted Electronically (If no, Submit Copy)		Yes No		-	on (Top), Depth an		Sample	
		Yes No	Nam	e		Тор	Datum	
		YesNoYesNoYesNo						
List All E. Logs Run:								
		CASING	G RECORD	ew Used				
		Report all strings set	-conductor, surface, inte	ermediate, product	tion, 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: —— Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated							ement Squeeze Record I of Material Used)	Depth	
TUBING RECORD: Size: Set At:			At: Packer At: Liner Run:							
Date of First, Resumed Production, SWD or ENHR.			₹.	Producing N	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	Bbls. Gas M		Mcf	Mcf Water		Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:				METHOD	OF COMPLE	ETION: PRODUCTION INTERVAL:			ERVAL:	
Vented Sold Used on Lease				Open Hole Perf. Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)						
(If vented, Submit ACO-18.)			Other (Specify)							

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Form	ACO1 - Well Completion						
Operator	OXY USA Inc.						
Well Name	SHELL B-1						
Doc ID	1069206						

All Electric Logs Run

CEMENT BOND LOG

MICROLOG

COMPACT PHOTO DENSITY COMPENSATED NEUTRON MICRORESISTIVITY LOG

ARRAY INDUCTION SHALLOW FOCUSED ELECTRIC LOG

Form	CO1 - Well Completion						
Operator	OXY USA Inc.						
Well Name	SHELL B-1						
Doc ID	1069206						

Tops

Name	Тор	Datum
CHASE	2495	
COUNCIL GROVE	2764	
HEEBNER	3746	
TORONTO	3766	
LANSING	3807	
KANSAS CITY	4014	
MARMATON	4279	
CHEROKEE	4478	
АТОКА	4522	
MORROW	4609	
ST. GENEVIEVE	4680	
ST. LOUIS	4736	

Form	ACO1 - Well Completion						
Operator	OXY USA Inc.						
Well Name	SHELL B-1						
Doc ID	1069206						

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth	
4	4688-4698 ST. GENEVIEVE	20 BBL 7% KCL	4688-4698	
4	4656-4674 MORROW		4656-4674	
		FRAC. 1141000 SCF N2 100200# 20/40 MESH SAND 538 BBL TOTAL LOAD	4656-4698	
4	4506-4514 CHEROKEE	20 BBL 7% KCL	4506-4514	
4	4392-4402 MARMATON		4392-4402	
		ACID 2700 GAL 7.5% FE MCA	4392-4514	
		FLUSH 1260 GAL 7% KCL		
4	4142-4152 KANSAS CITY A	20 BBL 7% KCL	4142-4152	
4	3999-4007, 4054- 4059 LANSING G		3999-4059	
		ACID 800 GAL 15% FE MCA	3999-4007	
		FLUSH 1092 GAL 4% KCL		
4	3811-3818 LANSING A	20 BBL 4% KCL	3811-3818	
		ACID 700 GAL 15% FE MCA	3811-3818	
		FLUSH 966 GAL 4% KCL		

FIELD SERVICE TICKET 1717 01977 A



1700 S. Country Estates Rd. P.O. Box 129 Liberal, Kansas 67905 Phone 620-624-2277

PHESE	SURE PUMPI	NG & WIRELINE					DATE	TICKET NO.	1.000		-
DATE OF 8-5-11 DISTRICT /717					NEW WELL					TOMEF ER NO	: .:
CUSTOMER OXUD					LEASE Shall B # (WELL NO.						
ADDRESS					COUNTY	Fin	rey	STATE	KS		11
CITY STATE					SERVICE C	REWR	Mostile	J. Mas	Alez.	K/S	noku
AUTHORIZED BY J. BEINNETT				JOB TYPE:	242	898"	SUCH	oce			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQI	JIPMENT#	HRS	TRUCK CALL		S-TITE	133	TIME
34726	19	19827	3				ARRIVED AT	JOB	1		6200
19910	3	14006			<u> </u>		START OPER	ATION		AMA	30
30464	3						FINISH OPEF	ATION		畿	1045
19808	3						RELEASED		5	AM	11.00
							MILES FROM	STATION TO	O WELL	85	MAI
	thorized to ex	RACT CONDITIONS: (This recute this contract as an a f and only those terms and	gent of the c	ustomer. A	s such, the unde	rsigned agi	ees and acknowle	dges that this o			

become a part of this	s contract without the written consent of an officer of Basic En	lergy Services Lr.	s		1-1	-	1/	
				(WELL OWNER	1		ACTOR OF	RAGEN
ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVIC	ES USED	UNIT	QUANTITY	NIT PR	EF S	5° MAC	UN
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E 363	Auto Fill Plant Coller	<u> </u>	L L`		11	3	0	1
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F1903	Dasket		<u> </u>		14	P	TH	
J-503	Stop Ring					8	1 pl	P
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		MATERIALS		%TAX	ON \$		2.0	
						TOTAL	被	A. g

THE ABOVE MATERIAL AND SERVICE

ORDERED BY CUSTOMER AND RECEIVED BY:

FIELD SERVICE ORDER NO.

REPRESENTATIVE

1 Xvey

SERVICE

	Liberal	SERVICES , Kansas	,	L			Cement Rep	זוסנ
ustomer	DXu			Lease No.			ate 8-5-11	
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asing Sx	" 24#	Depth		County E	inner	State	S	
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asing size	85/8"	2y#	Tubing Size			Shots/Ft	Lead 390	SK I
epth	1806.		Depth		From	To	H-con w	36 CL
olume Di-		2	Volume		From	То	X4#PF,	22 WC
lax Press	2000#		Max Press		From	To		sk
Vell-Confec	110n 1795	-1	Annulus Vol.		From	То	Prem, Plu	s w/a
Plug Depth	461 (1760	Packer Depth		From	То	CC, K1#6	2F .
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Service Unit	s 347	26	38/11-19919	304164-1	9808 198	57-19566		
Driver Name		Klur	& Martinez	3.1	Madiaa V	' Sinda		

Customer Representative

Station Manager

Cementer Taylor Printing, Inc.

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1700 S. Country Estates Rd. P.O. Box 129 Liberal, Kansas 67905 Phone 620-624-2277

TICKET NO. 171701954

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICI	Ξ	\$ AMOUNT
renun	Blending & Mixing Serv, Ching, Bulk Delivery	5K	265			
6113	BIK Daliyan	TM	969			
CIIS Acape	Bulk Delivery' Depth Chrg, 4001'-5000'	Yhr	101			
66200	Depra Carg, 9001 9000	TAP				
68309	Plug Container	jab	0~			
E 100	Pick-up Milegge	Mi	85			
5003	Service Supervisor	63				
T105	Pick-up Miledge Service Supervisor Concert Odto Aquisition Monitor	22				
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Customer	Libera	SERVICE I, Kansas		Lease No.							
OXY USH					Walt # Carving Pagaint						
Shell				Country State			11110143 4 3 9				
	1/2 17-	Depin 4	Formation	Foodinty P	inney	I Description					
Job Type	42				l		22 34				
Pipe Data				Per	forating Data	Cement Data					
Casing size 51/2 174 Tubing Size				From To			Lead				
Depth	4896		Depth		From	То	See Call Sheet				
Volume			Volume		From	То	Sheet				
Max Press			Max Press Annulus Vol.		From	To	Tail in				
Well Connec	חסוז:						See Call Sheet				
Plug Depth			Packer Depth	r	From	То	Sheet				
Time	Casing Pressure	Tubing Pressure	Bbls. Pumbed	Rate		Servic	e Log				
04:40					onhoc	Held Se	Fery Meeting				
					Ria (hir, on bo	Hom w/ Csq,				
	-				T.P. 4	896.44 5.5.	44.35-				
04:50					Boot	+ Rie un	Equip,				
06:45	3800				Test	Punot Li	hes				
06:47	300		.5	4	Start fresh Hal						
06:48	300		12	4	Start Superflush II						
06:51	350		5	4	Start fresh HO						
06:57	400		62	5	Stari	+ Cont 215	5KC 13,5 #/201				
07:03					Shut	down & U	ashup				
07:07	0		Ð	6.4	Start	Disp. u/	fresh HyO				
07:25	650		103	3	Slow	RITE					
07:26	2100		113	3	Bank	n Plug					
07:31	Ð	-		0	Relea	se / float.	s Held				
0735	2500				Pressure Test Cog						
08:10	-0-				Releas	e					
08:20	300		4	2	Plug	Mouse Hole	w 205/ @ 15.6				
08:25	100		6	2	Plus	Rat Hol	e /w 205/ @ 15.6 e w/ Josk @ 15.6				
08:40					Wash	up					
09:00					End	106					
Service Unit	s 217	15	27909/9557	19828	1998						
Driver Name		hren	Mendoza								

J. Carrol **Customer Representative**

_

J. Bennett Station Manager

M. Cochrister Taylor Printing, Inc.

Attachment to Shell B-1 (API # 15-055-22110)

Cement & Additives

		# of Sacks	
String	Туре	Used	Type and Percent Additives
Surface	A-Con	Lead: 390	3% CC, 1/4# Cellflake, 0.2% WCA1
	Prem +	Tail: 150	2% CC, 1/4# Cellflake
Production	50-50 Poz	215	5% W-60, 10% Salt, 0.6% C-15, 1/4# Defoamer, 5# Gilsonite 1/4# Polyflake

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

November 30, 2011

LAURA BETH HICKERT OXY USA Inc. 5 E GREENWAY PLZ PO BOX 27570 HOUSTON, TX 77227-7570

Re: ACO1 API 15-055-22110-00-00 SHELL B-1 NW/4 Sec.17-22S-34W Finney 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, LAURA BETH HICKERT