

COPY *Jan*

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
ACO-1 WELL HISTORY  
DESCRIPTION OF WELL AND LEASE

API NO. 15- 055-20965

County Finney

approx. N/2 S/2 NW/4 Sec. 6 Twp. 25S Rge. 33 x East West

3480 Ft. North from Southeast Corner of Section

3960 Ft. West from Southeast Corner of Section  
(NOTE: Locate well in section plat below.)

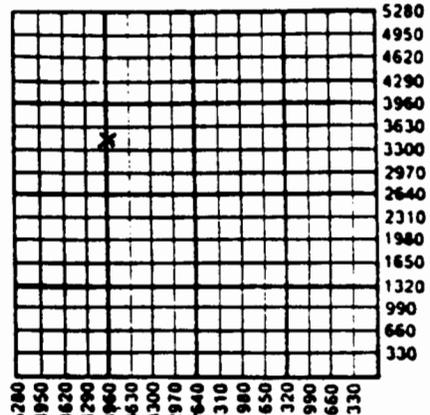
Lease Name Spratt A Well # 2

Field Name Panoma

Producing Formation Council Grove

Elevation: Ground 2920 KB 2931

Total Depth 3130' P8TD 2977'



*A172*

Amount of Surface Pipe Set and Cemented at 1104 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.

Operator: License # 5447

Name: OXY USA, Inc.

Address P.O. Box 26100

City/State/Zip Oklahoma City, OK 73126-0100

Purchaser: NN

Operator Contact Person: Raymond Hui

Phone ( 405 ) 749-2471

Contractor: Name: Cheyenne Drilling Company

License: 5382

Wellsite Geologist: Craig Corbett

Designate Type of Completion  
 New Well  Re-Entry  Workover

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

If OWM: old well info as follows:  
Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

Drilling Method:  
 Mud Rotary  Air Rotary  Cable

3-25-91 3-28-91 5-8-91  
Spud Date Date Reached TD Completion Date

RECEIVED  
STATE CORPORATION COMMISSION  
MAY 22 1991

CONSERVATION DIVISION  
Wichita, Kansas

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 spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 all wireline logs and drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Vic Tumlinson

Title Operations Drilling Manager Date 5-8-91

Subscribed and sworn to before me this 8th day of May, 19 91.

Notary Public Kay Ann Kilmer

Date Commission Expires 4-16-94

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) IS

**SIDE TWO**

Operator Name OXY USA, Inc. Lease Name Spratt A Well # 2  
 East County Finney  
 Sec. 6 Twp. 25S Rge. 33  West

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.)  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 (Submit Copy.)	<p style="text-align: center;"><b>Formation Description</b></p> <p style="text-align: center;"><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: center;">Top</th> <th style="text-align: center;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Winfield</td> <td style="text-align: center;">2621</td> <td style="text-align: center;">2863</td> </tr> <tr> <td>Council Grove</td> <td style="text-align: center;">2863</td> <td style="text-align: center;">3130</td> </tr> <tr> <td>TD</td> <td></td> <td style="text-align: center;">3130</td> </tr> <tr> <td>PBTD</td> <td></td> <td style="text-align: center;">2977</td> </tr> </tbody> </table>	Name	Top	Bottom	Winfield	2621	2863	Council Grove	2863	3130	TD		3130	PBTD		2977
Name	Top	Bottom														
Winfield	2621	2863														
Council Grove	2863	3130														
TD		3130														
PBTD		2977														

Ran CSNG log.

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#	1104'	Cl.C	425	6% gel
Production	7 7/8"	5 1/2"	14#	3127'	Cl.C	600	6% gel
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			Amount and Kind of Material Used		Depth	
2	2860-2870 (10'; 20 shots)			Acidized w/5000 gal of 7 1/2" FE acid.		2860-2899'	
	2874-2880 (6'; 12 shots)						
	2884-2899 (15'; 30 shots)			Frac'd w/30# XL gel		2860-2899'	
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	Size 2 3/8"	Set At 2912'	Packer At				
Date of First Production		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
Waiting on PL connection							
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio		Gravity	
	-	268					

<b>Disposition of Gas:</b> <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<b>METHOD OF COMPLETION</b> <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perforation <input type="checkbox"/> Dually Completed <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	<b>Production Interval</b> 2860-2899
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