

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1  
September 1999  
Form Must Be Typed

Operator: License # 5447  
Name: OXY USA, Inc.  
Address: P.O. Box 2528  
City/State/Zip: Liberal, KS 67905  
Purchaser: Pending  
Operator Contact Person: Jerry Hunt  
Phone: (316) 629-4200  
Contractor: Name: BEST WELL SERVICE  
License: 32564  
Wellsite Geologist: NONE  
Designate Type of Completion:  
       New Well        Re-Entry   X   Workover  
       Oil        SWD        SIOW        Temp. Abd.  
  X   Gas        ENHR        SIGW  
       Dry        Other (Core, WSW, Expl, Cathodic, etc)  
If Workover/Re-entry: Old Well Info as follows:  
Operator: OXY USA, Inc.  
Well Name: ATKINS M - #1

Original Comp. Date: 05-24-00 Original Total Depth: 5325  
       Deepening   XXX   Re-perf.        Conv. To Enhr./SWD  
  X   Plug Back        3021        Plug Back Total Depth  
       Commingled        Docket No.         
       Dual Completion        Docket No.         
       Other (SWD or Enhr.?)        Docket No.         
8-11-2000 08-30-00  
       Date of START        Date Reached TD        Completion Date of

OF WORKOVER

WORKOVER

API No. 15 - 081-213040001  
County: HASKELL  
SE - SE - NE - NW Sec 8 Twp 27 S. R. 33W  
1134 feet from S (N) (circle one) Line of Section  
2628 feet from E (W) (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE (NW) SW  
Lease Name: ATKINS G Well #: 3  
Field Name: PANOMA  
Producing Formation: COUNCIL GROVE  
Elevation: Ground: 2957 Kelly Bushing: 2970  
Total Depth: 3073 Plug Back Total Depth: 3021  
Amount of Surface Pipe Set and Cemented at 1759 feet  
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No  
If yes, show depth set         
If Alternate II completion, cement circulated from         
feet back to        w/        sx cmt.

Drilling Fluid Management Plan REWORK g# 3/25/03  
(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 No.:         
Quarter        Sec.        Twp,        S. R.        ☐ East ☒ West  
County:        Docket No.:       

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 6702, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of 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 geologist well report 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.

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: [Signature]  
Title: Capital Project Date 09-18-00  
Subscribed and sworn to before me this 18<sup>th</sup> day of Sept.  
20 00  
Notary Public: Anita Peterson  
Date Commission Expires: Oct. 1, 2001

KCC Office Use Only

       Letter of Confidentiality Attached  
If Denied, Yes ☐ Date:         
       Wireline Log Received  
       Geologist Report Received  
       UIC Distribution

Operator Name: OXY USA, Inc. Lease Name: ATKINS G Well #: 3Sec. 8 Twp. 27 S. R. 33W ☐ East ☒ West County: HASKELL

**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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☒ No  
(Attach Additional Sheets)Samples Sent to Geological Survey ☐ Yes ☒ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☐ Yes ☒ No  
(Submit Copy)List All E. Logs Run: **ALREADY SUBMITTED**
☒ Log Formation (Top), Depth and Datum ☐ Sample  
Name Top Datum
CASING RECORD ☒ New ☐ 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
Conductor					C		
Surface	12 1/4	8 5/8	24	1759	C	460	3% CC 1/2# FLOCELE
Production	7 7/8	5 1/2	15.50	3073.1	C	115	1/4 # FLOCELE 2% CC

## ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing	-			
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug off Zone	-			

Shots Per Foot	PERFORATION RECORD – Bridge Plugs Set/type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	2869 - 2882 2888 - 2890	ACIDIZE 1500 GALS 15% FERCHECK	
		51,250 75% N2 FOAM WITH 59,500# 12/20	
		SAND	
TUBING RECORD		Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Size 2 3/8	Set At 2955	Packer At	
Date of First, Resumed Production, SWD or Enhr. 08-30-00		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil BBLS	Gas Mcf 140	Water Bbls 122
		Gas-Oil Ratio	Gravity

Disposition of Gas

## METHOD OF COMPLETION

Production Interval

☐ Vented ☒ Sold ☐ Used on Lease  
(If vented, Submit ACO-18)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) \_\_\_\_\_
**2869' - 2882'**  
**2888' - 2890'**