

COPY CONFIDENTIAL

KCC

MAY 25 2001

Form ACC-1

September 1999

CONFIDENTIAL OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

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Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5447
Name: OXY USA, Inc.
Address: P.O. Box 2528
City/State/Zip: Liberal, KS 67905
Purchaser: Pending
Operator Contact Person: Vicki Carder
Phone: (316) 629-4200

Contractor: Name: Cheyenne Drilling
License: 5382
Wellsite Geologist: Tom Heflin
Designate Type of Completion:

☒ New Well ☐ Re-Entry
☒ Oil ☐ SWD ☐ SLOW ☐ Temp. Abd.
☐ 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: _____

Original Comp. Date: _____ Original Total Depth: _____
☐ Deepening ☐ Re-perf. ☐ Conv. To Enhr./SWD
☐ Plug Back ☐ Plug Back Total Depth
☐ Commingled ☐ Docket No. _____
☐ Dual Completion ☐ Docket No. _____
☐ Other (SWD or Enhr.?) ☐ Docket No. _____
☐ 03/06/01 ☐ 03/14/01 ☐ 04/02/01
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 081-21388-0000
County: Haskell
- SW - SE Sec 8 Twp. 27 S. R. 33W
663 feet from (S) N (circle one) Line of Section
1986 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Federal B Well #: 1

Field Name: _____
Producing Formation: Upper Morrow
Elevation: Ground: 2956 Kelly Bushing: 2969
Total Depth: 5400 Plug Back Total Depth: 5170
Amount of Surface Pipe Set and Cemented at 1757 feet
Multiple Stage Cementing Collar Used? ☒ Yes ☐ No
If yes, show depth set 3190

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 1800 ppm Fluid volume 1500 bbis
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. ☐ East ☒ West
County: _____ Docket No.: _____

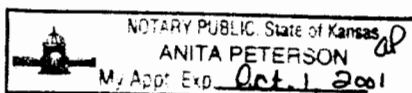
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 6702, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Vicki Carder
Title: Capital Projects Date May 25, 2001
Subscribed and sworn to before me this 25th day of May
2001
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



JATH237400

Side Two

Operator Name: OXY USA, Inc. Lease Name: Federal 8 Well # 1
 Sec. 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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Winfield	2686	+283
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Council Grove	2873	+96
List All E. Logs Run:	Gamma Collar Neutron	Heebner	4015	-1046
Sonic Induction Microlog		Toronto	4050	-1081
Geological Report		Lansing	4097	-1128
		Marmaton	4651	-1682
		Morrow	5072	-2103
		(See Third Page)		

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
Conductor					C		
Surface	12 1/4	8 5/8	24	1757	C	620	2% CC, 1/8# PolyFlake
Production	7 7/8	5 1/2	15.5	5400	C	130	4# Calseal, 5# Gilsonite, 10% Salt, .5% Halad 322

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input checked="" type="checkbox"/> Protect Casing	2500-3190	C	75	2% CC, 1/8# PolyFlake (Port Collar)
<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	5180-5196	1000 Gals 7.5% FE-HCL Acid	
	5170 CIBP w/2 sxs Cmt.		
4	5112-5135	2000 Gals 7.5 FE-HCL Acid. 32600# 20/40	
		Ottawa Sand, 33726 Gals Delta Gel	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8	5132		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 4/11/01			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	Water Bbls	Gas-Oil Ratio	Gravity
	9.16	TSTM	3		

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☒ Sold ☐ Used on Lease ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
 (If vented, Submit ACO-18) ☐ Other (Specify) _____

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Federal B-1 Third Page

LOG

FORMATION TOP DEPTH AND DATUM

NAME

TOP

DATUM

Chester

5198

-2229

St. Louis

5298

-2329

RELEASED

JUN 15 2008

FROM CONFIDENTIAL