

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

Form AC0-1  
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: N/A  
 Operator Contact Person: Kenny L. Andrews  
 Phone: (620) 629-4232  
 Contractor: Name: BOARDERLINE

License: \_\_\_\_\_  
 Wellsite Geologist: N/A

Designate Type of Completion:  
 \_\_\_\_\_ New Well \_\_\_\_\_ Re-Entry  Workover  
 \_\_\_\_\_ Oil \_\_\_\_\_ SWD \_\_\_\_\_ SIOW \_\_\_\_\_ 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: ALEXANDER K # 1

Original Comp. Date: 10/14/88 Original Total Depth: 5650  
 \_\_\_\_\_ 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. E-28,046  
10/01/02 \_\_\_\_\_ 10/01/02 \_\_\_\_\_ 10/02/02 \_\_\_\_\_  
 Spud Date or \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date or  
 Recompletion Date \_\_\_\_\_ Recompletion Date \_\_\_\_\_

API No. 15 - 081-20490-0001  
 County: HASKELL  
 \_\_\_\_\_ - SW - NW - SW Sec 34 Twp. 27 S. R. 34W  
 \_\_\_\_\_ 1650 feet from (S) N (circle one) Line of Section  
 \_\_\_\_\_ 4450 feet from (E) W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE NW (SW)  
 Lease Name: NORTH EUBANK MORROW UNIT Well # 401 W

Field Name: EUBANK  
 Producing Formation: MORROW  
 Elevation: Ground: 3081 Kelly Bushing: 3092  
 Total Depth: 5650 Plug Back Total Depth: 5588  
 Amount of Surface Pipe Set and Cemented at 1944 feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set 3215'  
 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 N/A ppm Fluid volume N/A bbls  
 Dewatering method used N/A  
 Location of fluid disposal if hauled offsite:  
 Operator Name: N/A  
 Lease Name: N/A 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: ENGINEERING TECHNICIAN Date 12/17/02  
 Subscribed and sworn o before me this 17th day of Dec.  
 20 02  
 Notary Public: [Signature]  
 Date Commission Expires: Oct. 1, 2005

**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: NORTH EUBANK MORROW UNIT Well #: 401 W

Sec. 34 Twp. 27 S. R. 34  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  No

Cores Taken  Yes  No

Electric Log Run  Yes  No  
*(Submit Copy)*

List All E. Logs Run:  
 PREVIOUSLY SENT IN.

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum

| 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   |                   |                           |                 |               |                                    |              |                            |
| Surface   | 12-1/4"           | 8-5/8"                    | 24              | 1944          | C                                  | 700          | 6% GEL                     |
| Production  | 7-7/8"            | 5-1/2"                    | 14              | 5649          | 1st stage<br>2 <sup>nd</sup> stage | 430<br>530   | 6% GEL                     |

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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| 4              | 5306'-5309', 5296'-5304', 5254'-5260'   |   |       |
|                | GUIBERSON G-6 PKR @ 5230'   |   |       |
|                |   |   |       |
|                |   |   |       |

| TUBING RECORD | Size   | Set At | Packer At | Liner Run   |
|---------------|--------|--------|-----------|---|
|               | 2-3/8" | 5230'  | 5230'     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

Date of First, Resumed Production, SWD or Enhr. 12/4/02 Producing Method  Flowing  Pumping  Gas Lift  Other (Explain) Injection Well

| Estimated Production Per 24 Hours | Oil BBLS | Gas Mcf | Water Bbbs | Gas-Oil Ratio | Gravity |
|-----------------------------------|----------|---------|------------|---------------|---------|
|                                   | N/A      | N/A     | N/A        | N/A           | N/A     |

Disposition of Gas  Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled \_\_\_\_\_  
*(If vented, Submit ACO-18)*

METHOD OF COMPLETION  Other (Specify) \_\_\_\_\_

Production Interval \_\_\_\_\_