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FEB 25 2003

KCC WICHITA

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Operator: License # 5447

Name: OXY USA Inc.

Address: P.O. Box 2528

City/State/Zip: Liberal, KS 67905

Purchaser: EOTT

Operator Contact Person: Vicki Carder

Phone: (620) 629-4200

Contractor: Name: Murfin Drilling Company

License: 30606

Wellsite Geologist: Tom Heflin

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FEB 24 2003

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:

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. _____

11/01/02 11/12/02 11/21/02

Spud Date or Date Reached TD Completion Date or Recompletion Date

INSTRUCTIONS: An original or two copies of this form shall be filed with the Kansas Corporation Commission, 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 Project Date February 24, 2003

Subscribed and sworn to before me this 24th day of Feb.20 03
Notary Public: Anita Peterson
Date Commission Expires: Oct. 1, 2005
 ANITA PETERSON
 MY COMMISSION EXPIRES
 October 1, 2005

 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

COPY

API No. 15 - 067-21503-0000

County: Grant

- NW - SE - NW Sec 13 Twp. 27 S. R. 35W

1390 feet from S (circle one) Line of Section1593 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

 (circle one) NE SE NW SW

Lease Name: Ladner F Well #: 3

Field Name: Un-named

Producing Formation: Morrow

Elevation: Ground: 3016 Kelly Bushing: 3027

Total Depth: 5565 Plug Back Total Depth: 5494

Amount of Surface Pipe Set and Cemented at 1698 feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____

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 4200 ppm Fluid volume 1600 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: RELEASED Lease No. _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: MAR 15 2004 Decree No. _____

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KCC Office Use Only

 Letter of Confidentiality AttachedIf Denied, Yes Date: _____ Wireline Log Received Geologist Report Received UIC Distribution

Side Two

Operator Name: OXY USA Inc. Lease Name: Ladner F Well #: 3Sec. 13 Twp. 27 S. R. 35W East West County: Grant

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 checked="" type="checkbox"/> Yes <input 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 Heebner	Top 3923 Datum -894
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Toronto	3938 -909
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	3968 -939
List All E. Logs Run:	Neutron Induction	Marmaton	4578 -1549
Digital Gamma	Multipole Array Gamma	Cherokee	4727 -1698
Geological Report	Cement bond	Atoka	4973 -1944
		Morrow	5039 -2010
(See Side Three)			

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	1698	C	750	35/65 POZ/C, 6% Gel, 2% Cal.Chloride, .25 Floeble
Production	7 7/8	5 1/2	15.5	5538	C	230	50/50 POZ, 2% Gel, 5# Gypsum 5# Kolite, 3% KCL, .5% Flac

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: ____ Perforate ____ Protect Casing ____ Plug Back TD ____ Plug off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives	
	-				
	-				
	-				

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
6	5084-5092, 5110-5125	162 bbls 15% FE, MCA Acid		

TUBING RECORD	Size 2 7/8	Set At 5162	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr. 11/27/02	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 145	Gas Mcf 18	Water Bbls 4	Gas-Oil Ratio 124	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) _____

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Side Three

COPY

Operator Name: OXY USA Inc. Lease Name: Ladner F Well #: 3

Sec. 13 Twp. 27S. R.35W

County: Grant

Name	Top	Datum
Chester	5264	-2235
St. Genieve	5376	-2347
St. Louis	5449	-2420

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