CONFIDENTIAL

KANSAS CORPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

"INDIAL"	LETION FORM RIPTION OF WELL & LEASE				
Operator: License #5447	API No. 15175-00480-0001				
Name: OXY USA Inc.	County:Seward				
Address: P.O. Box 2528					
City/State/Zip: Liberal, KS 67905 Releas:					
Durcheser	200 (5-14)				
Operator Contact Person: Vicki Carder	Footages Calculated from Nearest Outside Section Corner:				
Phone: (620) 629-4200	(circle one) NE SE NW				
	tal Lease Name: <u>Salley "A"</u> Well #: 1				
License: 32564	Field Name: Hugoton				
Wellsite Geologist: NA	Producing Formation: Chase				
Designate Type of Completion:	Elevation: Ground: 2902 Kelly Bushing:				
New Well Re-EntryXWorkover	Total Depth: 2760 Plug Back Total Depth: 2751				
OilSWDSIOWTemp. Abd.	Amount of Surface Pipe Set and Cemented at 600 feet				
X Gas ENHR SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☒ No				
Dry Other (Core, WSW, Expl, Cathodic, etc)	If yes, show depth set				
If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from				
Operator: OXY USA, Inc.	feet depth tosx cmt.				
Well Name: Salley "A" 1	sx one.				
Original Comp. Date: 12/05/49 Original Total Depth: 2760 Deepening X 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. 12/12/01 12/23/01 Date Reached TD Completion Date or OF WORKOVER	(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 an two copies of this form shall be filed with the Kansas 6702, within 120 days of the spud date, recompletion, workover or conformation of side two of this form will be held confidential for a period of 12 107 for confidentiality in excess of 12 months). One copy of all wireline logs of CEMENTINGTICKETS MUST BE ATTACHED. Submit CP-4 form with all plu. All requirements of the statutes, rules and regulations promulgated to regulate	onversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. months if requested in writing and submitted with the form (see rule 82-3-and geologist well report shall be attached with this form. ALL ugged wells. Submit CP-111 form with all temporarily abandoned wells.				
	e the oil and gas industry have been fully complied with and the statements				
herein are complete and correct to the best of my knowledge.	KCC Office Use Only				
Signature: Will Signature	, ACC Office use Offin				
Title: Capital Projects Date March 12, 2002	Letter of Confidentiality Attached If Denied, Yes Date:				
Subscribed and sworn o before me this at day of March	/				
20 () \supset	Wireline Log Received				
(List to to on.	Geologist Report Received				
Date Commission Expires: (A. +.), 2005	UIC Distribution				

ANITA PETERSON MY MAMISSION EXPIRES Triciber 1, 2005

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	TWATE	~ r.	Sid	de Two				
Operator Name: _	OXY	USA Inc.	 	_ Lease Name	Salley	"A"	Well #:	1
Sec. <u>17</u>	Twp. 31 S. I	R33W 🔲	East X West	County:		Seward		
time tool open and fluid recovery, and	w important tops and closed, flowing and flow rates if gas to reyed. Attach final g	l shut-in pressures surface test, along	i, whether shut-in with final chart(s)	pressure reac	hed static level, h	nydrostatic pre	essures, bottom	hole temperature.
Drill Stem Tests To		Yes X No)	□ Log	Formation (Top), Depth and	Datum	Sample
Samples Sent to G	Seological Survey	Yes 🛣 No	,	Name			Тор	Datum
Cores Taken	ological carvey	Yes K No	i					
Electric Log Run		Yes No						
(Submit Copy) List All E. Logs Ru	n: Gamma	Ray/CCL ♡						
		C	ASING RECO RD		□ Used			
Purpose of String	Size Hole		s set-conductor, sur			# Sacks	Type	and Percent
	Drilled	Set(in. O.D.)	Lbs./ff.	Depth	Cement	Used		dditives
Conductor					С			
Surface					С			
Production					С			
		ADDITIO	ONAL CEMENTIN	G / SQUEEZE	RECORD			
Purpose:	Depth Type of Top Bottom Cement #Sacks Used Type and Percent Additives							
Perforate Protect Casing	Top Bottom	Cement		Type and a desire a d				
Plug Back TD	-	 						
Plug off Zone	-				1, 1 m			
Shots Per Foot		RECORD - Bridge F		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth				
3	Specify Footage of Each Interval Perforated 2562-2568			64 bbls 75Q N2 Foam, 500 Gals 17% HCL Acid				
				Frac - 90300 Gals 80Q N2 Foam, 28000 SCF N2				
TUBING RECORD		Set At P 2746	acker At	Liner Run	Yes	⊠ No		
	ed Production, SWD or	Enhr. Produci	ng Method	wing 🛭 Pui	mping 🔲 Ga		ther (Explain)	
Estimated Production Per 24 Hours	Oil BBLS		Gas Mcf	1	er Bbls	Gas-O	il Ratio	Gravity
Disposition of Gas		METHOD	OF COMPLETION			Produc	tion Interval	
Vented	d ⊠ Sold □ t		_	' lole ⊠ Per	f. Dually C	_	ommingled	
_	nted, Submit ACO-1			Specify)				