

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM

Form ACO-14

September 1999

Form Must Be Typed

COPY

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 Gardner

Phone: (316) 629-4200

Contractor: Name: Zenith Corp.

License: 5141

Wellsite Geologist: Marvin Harvey

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 _____

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Enhr.?) Docket No. _____

02/20/01 03/02/01 T & A

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 189-22368-0000

County: Stevens

SE - SW - NE Sec 32 Twp. 31 S. R. 38W

2310 feet from S (N) (circle one) Line of Section

1651 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) (NE) SE NW SW

Lease Name: MLP Cavern I Well #: 1

Field Name: Cimarron Bend

Producing Formation: NA

Elevation: Ground: 3160 Kelly Bushing: 3170

Total Depth: 6250 Plug Back Total Depth: 6180

Amount of Surface Pipe Set and Cemented at 1877 feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 3015

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 900 ppm Fluid volume 1650 bbls

Deaerating 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.: _____

RELEASED

MAY 21 2002

FROM CONFIDENTIAL

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 4 2001

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 Gardner

Title: Capital Projects Date 5/3/01

Subscribed and sworn to before me this 3rd day of May

20 01

Notary Public: Antia 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: MLP Cavern I Well #: 1

Sec. 32 Twp. 31 S. R. 38W East West County: Stevens

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Sonic Induction Neutron Gamma Ray Geological Report	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Heebner</td> <td>3972</td> <td>-802</td> </tr> <tr> <td>Lansing</td> <td>4092</td> <td>-922</td> </tr> <tr> <td>Marmaton</td> <td>4748</td> <td>-1578</td> </tr> <tr> <td>Cherokee</td> <td>4955</td> <td>-1785</td> </tr> <tr> <td>Morrow</td> <td>5454</td> <td>-2284</td> </tr> <tr> <td>Chester</td> <td>5894</td> <td>-2724</td> </tr> <tr> <td>Ste. Genevieve</td> <td>6020</td> <td>-2850</td> </tr> <tr> <td>St. Louis</td> <td>6100</td> <td>-2930</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Heebner	3972	-802	Lansing	4092	-922	Marmaton	4748	-1578	Cherokee	4955	-1785	Morrow	5454	-2284	Chester	5894	-2724	Ste. Genevieve	6020	-2850	St. Louis	6100	-2930
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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	17 1/2	13 3/8	48	1152	C	625	2% CC, 1/8# Polyflake
Surface	12 1/4	8 5/8	24	1877	C	515	2% CC, 1/8# Polyflake
Production	7 7/8	5 1/2	15.5	6235	C	100	5# 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 type="checkbox"/> Protect Casing	2300-3015	C	55	2% CC, 1/8# Polyflake (Port Collar)
<input type="checkbox"/> Plug Back TD				
<input checked="" type="checkbox"/> Plug off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
4	6135-6137		2000 Gal 17% FE Acid, 1000 Gal Gel	

TUBING RECORD	Size NA	Set At NA	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. NA	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) T & A			
Estimated Production Per 24 Hours	Oil BBLs NA	Gas Mcf NA	Water Bbls NA	Gas-Oil Ratio NA Gravity NA

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) _____ T & A