

CONFIDENTIAL

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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM

Form ACO-1

September 1999

Form Must Be Typed

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WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5447 **KCC** API No. 15 - 175-21808-0000

Name: OXY USA, Inc. County: Seward

Address: P.O. Box 2528 - SE - SW - SE Sec 16 Twp. 32 S. R. 34W

City/State/Zip: Liberal, KS 67905 **SEP 03 2000** 642 feet from (S) N (circle one) Line of Section

Purchaser: Pending **CONFIDENTIAL** 1612 feet from (E) W (circle one) Line of Section

Operator Contact Person: Jerry Hunt

Phone: (316) 629-4200

Contractor: Name: _____

License: _____

Wellsite Geologist: Tom Hefflin

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: **RELEASED**

Operator: _____

Well Name: MAR 18 2002

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. _____

08/08/00 08/17/00

Spud Date or Re-completion Date Date Reached TD Completion Date or Re-completion Date

Footages Calculated from Nearest Outside Section Corner: (circle one) NE (SE) NW SW

Lease Name: Kapp A Well #: 6

Field Name: Unnamed

Producing Formation: _____

Elevation: Ground: 2926 Kelly Bushing: 2938

Total Depth: 6350 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 1741 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 **ACT 1 P's A DPW 3-18-02**

The mud collected from the Reserve Pit

Chloride content 900 ppm Fluid volume 1700 bbls

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 on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with this 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 COMMENTING 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: Capital Project Date: 09-08-00

Subscribed and sworn to before me this 8th day of Sept. 2000

Notary Public: [Signature]

Commission Expires: _____

NOTARY PUBLIC, State of Kansas
Seward County
HELEN M. SMITH
My Appl. Exp. 3-5-2001

KCC Office Use Only

Letter of Confidentiality Attached
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

IOG

X

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Side Two

Operator Name: OXY USA, Inc. Lease Name: Kapp A
 Sec. 16 Twp. 32 S. R. 34W East West County: S. Jefferson

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: Geo. Report Induction Log Neutron Log Gamma Ray Log	<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>4180</td> <td>-1244</td> </tr> <tr> <td>Toronto</td> <td>4200</td> <td>-1262</td> </tr> <tr> <td>Lansing</td> <td>4276</td> <td>-1338</td> </tr> <tr> <td>Marmaton</td> <td>4968</td> <td>-2030</td> </tr> <tr> <td>Morrow</td> <td>5574</td> <td>-2636</td> </tr> <tr> <td>Chester</td> <td>5804</td> <td>-2864</td> </tr> <tr> <td>St. Louis</td> <td>6214</td> <td>-3374</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Heebner	4180	-1244	Toronto	4200	-1262	Lansing	4276	-1338	Marmaton	4968	-2030	Morrow	5574	-2636	Chester	5804	-2864	St. Louis	6214	-3374
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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					C		
Surface	12 1/4	8 5/8	24	1741	C	455	3% CC, 1/2# Flocele
Production					C		

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	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
	Plug well as follows per/KCC: 100 sxs at 3190',	50 sxs at 1760', 40 sxs at 630',	
	10 sxs at 40'. Plug Rat Hole w/ 15 sxs and Mouse	Hole w/10 sxs. All cement 60/40 POZ, 6%	
	Gel, by Halliburton. Completed @ 11:30 PM 8/18/00		

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

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) P&A	_____ _____