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KCC WICHITA

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

ORIGINAL

Form ACO-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: _____
Operator Contact Person: Vicki Carder
Phone: (620) 629-4200
Contractor: Name: Best Well Service
License: NA
Wellsite Geologist: _____

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: Israel B-2

Original Comp. Date: 10/13/88 Original Total Depth: 6050
☐ Deepening ☐ Re-perf. ☐ Conv. To Enhr./SWD
☒ Plug Back 5875 Plug Back Total Depth
☐ Commingled Docket No. _____
☐ Dual Completion Docket No. _____
☐ Other (SWD or Enhr.?) Docket No. _____
09/30/03 10/30/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 129-20930-0001
County: Morton
 - NW - NW - SW Sec 4 Twp. 32 S. R. 39W
2310 feet from (S) N (circle one) Line of Section
330 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW (SW)

Lease Name: Israel A Well #: 11

Field Name: East Kinsler

Producing Formation: Morrow

Elevation: Ground: 3253 Kelly Bushing: 3264

Total Depth: 6050 Plug Back Total Depth: 5875

Amount of Surface Pipe Set and Cemented at 1732 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 _____ 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 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 Carder

Title: Capital Project Date February 13, 2004

Subscribed and sworn to before me this 13th day of Feb.

20 04

Notary Public: Anita Peterson

Date Commission Expires: Oct. 1, 2005

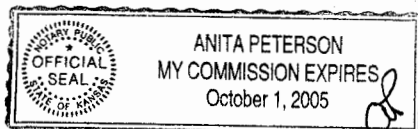
KCC Office Use Only

DENY Letter of Confidentiality Attached
If Denied, Yes ☒ Date: 02-25-04 DPW

_____ Wireline Log Received

_____ Geologist Report Received

_____ UIC Distribution



Side Two

Operator Name: OXY USA Inc. Lease Name: Israel A Well #: 11Sec. 4 Twp. 32 S. R. 39W ☐ East ☐ West County: Morton

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 ☐ NoCores Taken ☐ Yes ☐ NoElectric Log Run ☐ Yes ☐ No
(Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
Name Top Datum
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					C		
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	5498-5518	H	50	Cement Squeeze - See attached cmt tkt for additives
<input type="checkbox"/> Plug Back TD				
<input checked="" type="checkbox"/> Plug off Zone				

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
3	5880-5891	1400 gls 7 1/2% HCL	
3	5825-5832, 5839-5857	3000 gls 7 1/2% HCL	
	CIBP @ 5875	15240 gls 65Q WF130 N2, 32375# 20/40 Sand	
TUBING RECORD		Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Size	Set At	Packer At	
2 3/8	5857		
Date of First, Resumed Production, SWD or Enhr. 10/30/03		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	Gas Mcf	Water Bbls Gas-Oil Ratio Gravity
	2	62	50 31000

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)