

**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

Operator: License # 5447  
 Name: OXY USA, Inc.  
 Address: P.O. Box 2528  
 City/State/Zip: Liberal, KS 67905  
 Purchaser: CIG  
 Operator Contact Person: Kenny Andrews  
 Phone: (316) 629-4232  
 Contractor Name: N/A  
 License: N/A  
 Wellsite Geologist: N/A

Designate Type of Completion:  
 New Well       Re-Entry       Workover  
 Oil       SWD       SIOW       T&E Abd.  
 Gas       ENHR       SIGW  
 Dry       Other (Core, WSW, Expl, Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:  
 Operator: OXY USA, Inc. CITIES SERVICE OIL  
 Well Name: MILLER Q # 1 COMPANY

Original Comp. Date: 5/12/53 Original Total Depth: 3390  
~~XXX~~ PLUGGED OFF ZONE  
 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. \_\_\_\_\_  
9/18/00      9/22/00      9/22/00  
 Date of START      Date Reached TD      Completion Date or  
 Recompletion Date  
 OF WORKOVER

API No. 15 - 15-129-10293-0001  
 County: MORTON  
NE - NE - SW Sec 29 Twp. 33 S. R. 42W  
2310 feet from (S) N (circle one) Line of Section  
2310 feet from E (W) (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE NW (SW)  
 Lease Name: MILLER Q Well #: 1  
 Field Name: GREENWOOD  
 Producing Formation: TOPEKA  
 Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_  
 Total Depth: 3390 Plug Back Total Depth: 3214  
 Amount of Surface Pipe Set and Cemented at 600 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 REWORK 9/4 6/20/01  
 (Data must be collected from the Reserve Pit)  
 Chloride content N/A ppm Fluid volume N/A bbls  
 Dewatering method used N/A  
 Location of fluid disposal if hauled offsite:  
 Operator Name: N/A  
 Lease Name: N/A License No.: N/A  
 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: Kenny Andrews  
 Title: Engineering Technician Date 11/10/00  
 Subscribed and sworn to before me this 10<sup>th</sup> day of November  
20 00  
 Notary Public: Anta 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: QXY USA, Inc. Lease Name: MILLER Q Well #: 1

Sec. 29 Twp. 33 S. R. 42W  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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run: <u>NONE</u>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> 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	12-1/4"	8-5/8"	22.7	600	C	300	
Production	7-7/8"	5-1/2"	15.5	3389	C	400	

**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 checked="" type="checkbox"/> Plug off Zone	3226' - 3288'	60/40 Poz	N/A	3% CaCl <sub>2</sub> + Flo-Seal

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
5	cement ret. @ 3216,		
5	3202-10,3190-96,3164-84,3142-54,3093-97,3036-40,		
5	3010-30,2970-74,2948-56,2930-38,2914-18,2892-2900		
2	2865-74,2769-73,2752-61,2700-03,2693-97,2676-86	All 2 SPF Treated with 4000 GALS 17% HCL ACID	

<b>TUBING RECORD</b>	Size 2-3/8"	Set At 3211	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
----------------------	----------------	----------------	-----------	----------------------------------------------------------------------------------

Date of First, Resumed Production, SWD or Enhr. 9/21/00	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Estimated Production Per 24 Hours	Oil BBLS N/A	Gas Mcf 453	Water Bbls 0	Gas-Oil Ratio N/A	Gravity N/A
-----------------------------------	-----------------	----------------	-----------------	----------------------	----------------

Disposition of Gas METHOD OF COMPLETION Production Interval 2676' - 3210' OA

- Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled  
 (If vented, Submit ACO-18)  Other (Specify) \_\_\_\_\_