

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: Pending  
Operator Contact Person: Vicki Carder  
Phone: (316) 629-4200

Contractor: Name: Key Energy SERVICES  
License: 32393

Wellsite Geologist: NA

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: Riley C-1

Original Comp. Date: 10-06-55 Original Total Depth: 3149  
☐ 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.             
01/14/01 01/14/01 02/05/01

**OF WORKOVER** Date of **START**            Date Reached TD            Completion Date of **WORKOVER**           

API No. 15 - 129-10312-0001  
County: Morton  
       - SW - SW - NE Sec 22 Twp. 34 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: Riley C Well #: 1

Field Name: Greenwood

Producing Formation: Topeka

Elevation: Ground:            Kelly Bushing:           

Total Depth: 3149 Plug Back Total Depth: 3145

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 gtr 6/18/02

(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume NA bbls

Dewatering method used NA

Location of fluid disposal if hauled offsite:           

Operator Name: NA

Lease Name: NA License No.: NA

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 Projects Date May 9, 2001

Subscribed and sworn to before me this 9th day of May

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Notary Public: Anita 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  
**RELEASED**  
**APR**  
**SAR 26 2002**

Operator Name: OXY USA, Inc. Lease Name: Riley C Well #: 1Sec. 22 Twp. 34 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  
(Attach Additional Sheets)☐ Yes ☒ No

Samples Sent to Geological Survey

☐ Yes ☒ No

Cores Taken

☐ Yes ☒ No

Electric Log Run

☒ Yes ☐ No

(Submit Copy)

List All E. Logs Run:

Cement Bond Log

☒ 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	12 1/4	8 5/8	22.5	600	C	250 200	1/4# Flocele, 1% CalChlor 1/2# Flocele, 1% CalChlor
Production	7 7/8	5 1/2	14	3148	C	100	1/2# Flocele

## ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing	2383-2384	<b>FAILED</b>	<b>ZERO</b>	Could not pump cement into <i>annular space behind casing; no returns</i>
<input type="checkbox"/> Plug Back TD	2500'-2720'	<b>2<sup>nd</sup> TRY C</b>	50	.6% Halad, 2% CC
<input 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
2	2678-2684, 2690-2696	1200 Gals 17% HCL-FE Acid	
2	2876-2882, 2896-2900	1000 Gal 17% HCL -FE Acid	
TUBING RECORD		Liner Run	
Size	Set At	Packer At	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2 3/8	3099		
Date of First, Resumed Production, SWD or Enhr. 02/26/01		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
	NA	194	6
			Gas-Oil Ratio
			NA
			Gravity
			NA

Disposition of Gas

METHOD OF COMPLETION

Production Interval

**2684'-2900'**
☐ Vented ☒ Sold ☐ Used on Lease  
(If vented, Submit ACO-18)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled

☐ Other (Specify)