

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: \_\_\_\_\_  
Operator Contact Person: Vicki Carder  
Phone: (620) 629-4200  
Contractor: Name: Best Well Service  
License: \_\_\_\_\_  
Wellsite Geologist: \_\_\_\_\_  
Designate Type of Completion:  
       New Well        Re-Entry   X   Workover  
       Oil        SWD        SIOW        Temp. Abd.  
       Gas        ENHR        SIGW  
       Dry   X   Other (Core, WSW, Expl, Cathodic, etc) Water Supply  
If Workover/Re-entry: Old Well Info as follows:  
Operator: Cities Service Oil & Gas Corp.  
Well Name: Wilburton Morrow "C" Sand Unit - 2105

Original Comp. Date: 11/14/84 Original Total Depth: 5050  
       Deepening   X   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. \_\_\_\_\_  
02/22/02        03/25/02  
Spud Date or        Date Reached TD        Completion Date or  
Recompletion Date        Recompletion Date       

API No. 15 - 129-20711-0001  
County: Morton  
       -   C   -   SW   -   NW   Sec   4   Twp   35   S. R.   41W    
         3300   feet from S   (N)   (circle one) Line of Section  
         4620   feet from E   (W)   (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
       (circle one) NE   SE   NW SW  
Lease Name: Wilburton Morrow Sand Unit Well #: 2105  
Field Name: Wilburton  
Producing Formation: Topeka  
Elevation: Ground: 3479 Kelly Bushing: 3490  
Total Depth: 5050 Plug Back Total Depth: 4790  
Amount of Surface Pipe Set and Cemented at 1490 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

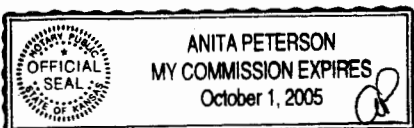
(Data must be collected from the Reserve Pit)

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 Projects Date July 9, 2002  
Subscribed and sworn to before me this 9th day of July  
20 02  
Notary Public: Anita Peterson  
Date Commission Expires: Oct 1, 2005



KCC Office Use Only

       Letter of Confidentiality Attached  
If Denied, Yes ☐ Date: \_\_\_\_\_  
       Wireline Log Received  
       Geologist Report Received  
       UIC Distribution

## Side Two

Operator Name: OXY USA Inc. Lease Name: Wilburton Morrow Sand Unit Well #: 2105Sec. 4 Twp. 35 S. R. 41W ☐ 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
Perforate				
Protect Casing	-			
Plug Back TD				
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
	CIBP @ 4790		
4	3471-72, 3425-26, 3392-93	Cmt Sqz - Plug off zone, Class H, 50 sxs	3004-3492
4	3195-96, 3252-53, 3294-95	Cmt Sqz- Plug off zone, Class H, 50 sxs	3011-3335
4	3194-95, 3294-95, 3425-26, 3471-72	Cmt Sqz - Plug off zones, Class H, 200 sxs	3425-26, 3471-72, 3194-95
4	3452-72, 3439-52, 3425-35, 3402-20, 3392-3402, 3281-95, 3271-81, 3252-66, 3195-3210	6200 Gals 17% HCL & 10,600 Gals 15% HCL	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8	3140		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 04/03/02	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 NA	Gas Mcf NA	Water Bbls 300	Gas-Oil Ratio Gravity

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)