

KANSAS CORPORATION COMMISSION

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KCC WICHITA September 1999

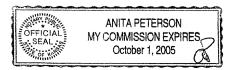
Form Must Be Typed

OPINAL

OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE Operator: License # API No. 15 - 081-20760-0001 Name: OXY USA Inc. County: Haskell Address: P.O. Box 2528 _-<u>SE_-SW_-NE_Sec_3_Twp. 29_S.R_33W</u> City/State/Zip: Liberal, KS 67905 2130 feet from S (N)circle one) Line of Section NA ____ feet from W (circle one) Line of Section Purchaser: Operator Contact Person: Vicki Carder Footages Calculated from Nearest Outside Section Corner: Phone: (620) 629-4200 (circle one) (NE) SE NW SW Contractor: Name: Best Well Service Lease Name: Longwood A Well #: 2 License: __ Un-named Field Name: Wellsite Geologist: NA Producing Formation: NA Elevation: Ground: 2955 Kelly Bushing: 2968 Designate Type of Completion: New Well __X Workover _____ Re-Entry Total Depth: 5750 Plug Back Total Depth: 4790 X _ Temp. Abd. _____ SWD _____ SIOW Amount of Surface Pipe Set and Cemented at ______ 1855 ____feet _____ Gas ____ ENHR ___ SIGW Multiple Stage Cementing Collar Used? ☑ Yes☐ No ____ Dry ____ Other (Core, WSW, Expl, Cathodic, etc) If yes, show depth set 5750 If Workover/Re-entry: Old Well Info as follows: If Alternate II completion, cement circulated from _____ Operator: OXY USA, Inc. feet depth to ______w/ sx cmt. Well Name: Longwood A-2 Drilling Fluid Management Plan Original Comp. Date: <u>07/30/93</u> Original Total Depth: 5750 (Data must be collected from the Reserve Pit) _____ Deepening _____ Re-perf. ____ Conv. To Enhr./SWD Chloride content _____ ppm Fluid volume _____ bbls X__ Plug Back _____ 4790 Plug Back Total Depth Dewatering method used ____Commingled Docket No. Location of fluid disposal if hauled offsite: _____ Dual Completion Docket No. Operator Name: _____ Other (SWD or Enhr.?) Docket No. ___ Lease Name: _____ License No.: _____ 05/06/04 Quarter _____ Sec. _____ Twp, ____ S. R. ___ East __ West 05/19/04 Date Reached TD Completion Date or Spud Date or County: _____ Docket No.: Recompletion Date Recompletion Date INSTRUCTIONS: An original an 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 CEMENTINGTICKETS 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. KCC Office Use Only Signature: Letter of Confidentiality Attached Title: Capital Project _ Date July 9, 2004____ If Denied, Yes Date: Subscribed and sworn to before me this __ Wireline Log Received _____ Geologist Report Received Notary Public:

UIC Distribution



Date Commission Expires: 1