

## Kansas Corporation Commission Oil & Gas Conservation Division

## WELL COMPLETION FORM WELL HISTORY – DESCRIPTION OF WELL & LEASE

Form ACO-1

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Form Musa Be Typed

Operator: License #	#5447		API No. 15 - <u>067-21585-0000</u>		
Name:	OXY USA Inc.		County:	Grant	
Address:	P.O. Box	2528	<u>W/2</u> -	<u>SW - SE Sec 22</u> Tw	/p. <u>27</u> S.R <u>36W</u>
City/State/Zip:	Liberal, KS	67905	625	feet from S N (circle	e one) Line of Section
Purchaser:	NA.		2290	feet from E) W (circle	le one) Line of Section
Operator Contact Perso	NA vir.: Vicki Ca (620) 629-4200  Murfin Drilling Co., In 30606  Marvin T. Harvey, Jr pletion: Re-Entry	rder 💫	Footages Calculat	ed from Nearest Outside Sect	tion Corner:
Phone:	(620) 629-4200	~°°°C	(circle	one) NE SE NW	SW
Contractor: Name:	Murfin Drilling Co., In	<u>. , 47 %</u>	Lease Name:	Harris A We	ell #:1
License:	30606	100 B2	Field Name:		
Wellsite Geologist:	Marvin T. Harvey, Jr	. W. 300g	Producing Formati	ion: Well TA'd	
Designate Type of Com	pletion:	Chris	Elevation: Ground	d: Kelly Bus	shing: 3113
X New Well	Re-Entry	Workover	Total Depth: 5	720 Plug Back Total Dep	
Oil :	SWD SIOW	X Temp. Abd.		Pipe Set and Cemented at	
GasI	ENHR SIGW			menting Collar Used?	☐ Yes ☑ No
	Other (Core, WSW, Expl, C	athodic. etc)	If yes, show depth set		
If Workover/Re-entry: C			If Alternate II completion, cement circulated from		
Operator:			ł	w/	
			100t departe		SX OIII.
			Drilling Fluid Mana	agement Plan	
Original Comp. Date: Original Total Depth:			(Data must be collected from the Reserve Pit)		
Deepening Re-perf Conv. To Enhr./SWD			Chloride content <u>700 mg/l</u> ppm Fluid volume <u>1600</u> bbls		
	Plug B		1	d used Evaporation	
Commingled	-		1	sposal if hauled offsite:	
Dual Completion			1		
	Enhr.?) Docket No			License N	
	06/22/04		1		
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date		ec Twp,S. R Docket No.:	
Information of side two of 107 for confidentiality in	D days of the spud date, rec of this form will be held con excess of 12 months). On	completion, workover or co fidential for a period of 12 e copy of all wireline logs	niversion of a well. Ru months if requested in and geologist well repo	Commission, 130 S. Market – I le 82-3-130, 82-3-106 and 82- writing and submitted with the rt shall be attached with this fo P-111 form with all temporarily	-3-107 apply. e form (see rule 82-3-
All requirements of the s	statutes, rules and regulation	ns promulgated to regulat	e the oil and gas indust	try have been fully complied w	rith and the statements
herein are complete and	I correct to the best of my k	nowledge.			
Signature: Viola Lander			·	KCC Office Use Only	
			Letter of 0	Confidentiality Attached	
Title: Capital Pr		_ Date October 6, 2004_	If Denied, Yes Date:		
Subscribed and sworn to	o before me this 6	_day of October			
20 04 (		$\bigcap$ 1	Wireline L	og Received	
Notary Public:	Took the	boulen	Geologist Report Received		
Date Commission Expire	es: <u>Kerrember</u> C	3, 2046	UIC Distri	bution	,

