

**CONFIDENTIAL**

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

**ORIGINAL**

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: ONEOAK  
Operator Contact Person: Kenny Andrews  
Phone: (316) 629-4232 **KCC**  
Contractor: Name: N/A  
License: N/A **DEC 21 2000**  
Wellsite Geologist: N/A  
Designate Type of Completion:  
     New Well      Re-Entry   X   Workover  
     Oil      SWD      SIOW      Temp. Abd.  
  X   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: BARNES A # 1

Original Comp. Date: 4/19/61 Original Total Depth: 5407  
     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.       
10/6/00 11/2/00 11/2/00  
**RECEIVED**  
Date of **START** 10/6/00 Date Reached TD 11/2/00 Completion Date 11/2/00  
Recompletion Date 11/2/00

API No. 15 - 15-129-00484-0001  
County: MORTON  
     - C - NE - SW Sec 18 Twp. 35 S. R. 41W  
1980 feet from (S) N (circle one) Line of Section  
1933 feet from E (W) (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW (SW)  
Lease Name: BARNES A Well #: 1  
Field Name: GREENWOOD  
Producing Formation: TOPEKA  
Elevation: Ground:      Kelly Bushing:       
Total Depth: 5407 Plug Back Total Depth: 3350  
Amount of Surface Pipe Set and Cemented at 1541 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 g9 12-29-00**  
(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 12/21/00  
Subscribed and sworn o before me this 21<sup>st</sup> day of December  
20 00  
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

NOTARY PUBLIC, State of Kansas  
ANITA PETERSON al  
My Appt. Exp. Oct. 1, 2001

**CONFIDENTIAL**  
**RELEASED**  
**JAN 04 2005**

**DEC 26 2000**

**FROM CONFIDENTIAL**

X

ORIGINAL

Side Two

CONFIDENTIAL

Operator Name: OXY USA, Inc. Lease Name: BARNES A Well # \_\_\_\_\_

Sec. 18 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E. Logs Run:				

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> 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"	24	1541	C	700	
Production	7-7/8"	4-1/2"	9.5	3539	C	200	

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 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 <i>(Amount and Kind of Material Used)</i>	Depth
5	3298-3306,3272-92,3232-42,3166-3214		
2	2978-86,2944-50,2929-38	All 2 SPF Acidized w/ 4150 gals 15% HCL & fracd w/ 12,000 gals 50% N2	

TUBING RECORD	Size 2-3/8"	Set At 3340	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 11/2/00	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil BBLS N/A	Gas Mcf 167	Water Bbls 20	Gas-Oil Ratio N/A	Gravity N/A
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Disposition of Gas METHOD OF COMPLETION Production Interval 2929-3306

Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled

*(If vented, Submit ACO-18)*  Other (Specify) \_\_\_\_\_