

Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1 September 1999

Form Must Be Typed

WELL COMPLETION FORM OF DESCRIPTION OF WELL & LEASE

Operator: License #	5447	•	APIN	lo. 15 - <u>0</u> 8	81-21557	-00-1	<u> </u>				
Name:	OXY USA Inc.			County: Haskell							
Address:	P.O. Box	2528	NW	- <u>SE</u> -	NE -	NW Sec	9	Twp. 27	S. R_	33W	
City/State/Zip:		67905				feet from					
Purchaser:						feet from		-			
Operator Contact Person	:Vicki Ca	rder RECEVEL)	Foota	ges Calcula	ated from	Nearest O	utside S	ection C	orner:		
Phone:	(620) 629-4200			: (circ	le one)	NE S	E W	D sv	V		
Contractor: Name:	Murfin Drilling Co., In	c. AMK U AMY	Lease	Name:		Atkins O		Well #:	3	}	
License:	30606	- LOT MICHT	A Field	Name:	·		Atkins				
Wellsite Geologist:	Tim Hedrick	UND ASSOCIATION	Produ	icing Forma	ation:	N.A	/well TA	\'d	-		
Designate Type of Compl	letion:	· · · · · ·	Eleva	tion: Grour	nd:	2941	_ Kelly	Bushing	:295^	1	
X New Well	Re-Entry	Workover	Total	Depth:	5350	Plug Back	c Total E	Depth: _	5300	3	
Oil S'	WDslow	X Temp. Abd.	Amou	int of Surfac	e Pipe S	et and Cen	nented a	at	1948	feet	
X Gas E	NHRSIGW		1.	ole Stage Co							
Dry O	ther (Core, WSW, Expl, C	athodic, etc)	If yes	, show dept	h set	3139					
If Workover/Re-entry: Ok	d Well Info as follows:		1	rnate II com							
Operator:			ı	epth to						sx cmt.	
Well Name:											
*			Drillin	g Fluid Man	nagement	Plan					
Original Comp. Date:	Original Total	Depth:	(Data n	nust be collecte	d from the R	eserve Pit)					
Deepening	Re-perf.	_ Conv. To Enhr./SWD	Chlori	ide content	1200 mg	<u>1/I</u> ppm F	luid vol	ume	1600	bbls	
Plug Back	Plug B	ack Total Depth	Dewa	tering meth	od used	Evapora	ation				
Commingled	Docket No.		Locat	ion of fluid o	disposal it	f hauled off	site:				
Dual Completion		<u> </u>	Opera	ator Name:	·						
Other (SWD or E			i	Name:				se No.:			
12/20/04	01/01/05	01/26/05		eřS				_			
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date	l .	ty:							
INSTRUCTIONS: An orig Kansas 6702, within 120 Information of side two of 107 for confidentiality in e CEMENTINGTICKETS M	days of the spud date, re this form will be held con excess of 12 months). Or	completion, workover or co fidential for a period of 12 se copy of all wireline logs	onversion o months if i and geolog	of a well. R requested in dist well rep	ule 82-3-7 n writing a ort shall t	130, 82-3-1 and submitt be attached	06 and ted with I with thi	82-3-107 the form	7 apply. (see rule Al I	82-3-	
All requirements of the sta			te the oil ar	nd gas indu	stry have	been fully	complie	d with ar	nd the stat	tements	
herein are complete and	correct to the best of my l	knowledge.			KCC	Office Li	20 0:-1				
Signature: Nale Lander			KCC Office Use Only								
Title: <u>Capital Pro</u>	ient	Date April 4, 2005	1 400	Letter of	f Confider	ntiality Atta	ched				
	11+1	Date April 4, 2005	(If Denied	l, Yes 🗀	Date:		-		Ì	
Subscribed and sworn to	before me this	_day of									
20 00	. 0.		I	Wireline	Log Rec	eived					
Notary Public: Unit Attendon				Geologist Report Received							
Date Commission Expires: 0.4 1, 2005				UIC Dist	tribution		•				
/ Committee and			L	•							



ANITA PETERSON MY COMMISSION EXPIRES October 1, 2005

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