

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM

Form ACO-1

September 1999

Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE

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: Murfin Drilling Co., Inc.
License: 30616
Wellsite Geologist: Marvin T. Harvey, Jr.
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl, Cathodic, etc)
If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____

API No. 15 - 175-21993-00-00
County: Seward
SE - NE Sec 18 Twp. 34 S. R. 33W
1980 feet from S (circle one) Line of Section
660 feet from (circle one) E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE NW SW
Lease Name: Tucker D Well #: 1
Field Name: Salley
Producing Formation: Morrow
Elevation: Ground: 2883 Kelly Bushing: 2894
Total Depth: 6723 Plug Back Total Depth: 6167
Amount of Surface Pipe Set and Cemented at 1680 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.

Original Comp. Date: _____ Original Total Depth: _____
 Deepening 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. _____
08/04/05 08/16/05 11/04/05
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 1800 mg/l ppm Fluid volume 1700 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp, _____ S. R. East West
County: _____ Docket No.: _____

RECEIVED

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 Project Date 11/29/05
Subscribed and sworn to before me this 29 day of Nov
05
Notary Public: Anita Peterson
Date Commission Expires: Oct. 1, 2009

KCC Office Use Only
 Letter of Confidentiality Attached
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ANITA PETERSON
Notary Public - State of Kansas
My Appt. Expires October 1, 2009

X