





Kansas Corporation Commission Oil & Gas Conservation Division

WELL COMPLETION FORM

September 1999
Form Must Be Typed

Form ACO-1

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License #	#		API No. 15 - 129-21783-00-06				
Name:	OXY USA Inc.		County:	County: Morton			
Address:	P.O. Box 2528			<u> W/2</u> Sec′	19Twp35_	_S. R <u>41W</u>	
City/State/Zip:	Liberal, KS 67905		230	feet from S	N (circle one)	Line of Section	
Purchaser: ONEOK			feet from E / (Circle one) Line of Section				
Operator Contact Person: Vicki Carder			Footages Calculated from Nearest Outside Section Corner:				
Phone:	(620) 629-4200	****	(circle one	e) NE SE	NW SW	>	
Contractor: Name:	Cheyenne Drilling L	Р	Lease Name:	Barnes A	Well #: _	2	
License:	33375		Field Name:	Gree	nwood		
Wellsite Geologist:	NA NA		Producing Formation:	Waba	unsee		
Designate Type of Comp	letion:		Elevation: Ground:	3569 ~ k	Kelly Bushing:	3575	
X New Well	Re-Entry	Workover	Total Depth: 3595	Plug Back To	otal Depth:	2956	
Oil S	WDslow	Temp. Abd.	Amount of Surface Pip	e Set and Cemen	ted at1	<u>545</u> fee	
X Gas E	NHR SIGW		Multiple Stage Cement			☐ Yes 🛛 No	
Dry O	ther (Core, WSW, Expl. (Cathodic, etc)	If yes, show depth set				
If Workover/Re-entry: Ole		If Alternate II completion, cement circulated from					
Operator:		feet depth tow/sx cmt					
Well Name:					V		
			Drilling Fluid Managem	ient Plan			
Original Comp. Date: Original Total Depth:			(Data must be collected from the Reserve Pit)				
	Re-perf.		Chloride content 3400	·	d volume 1	000 bbis	
Plug Back Plug Back Total Depth			Dewatering method us				
Commingled Docket No			Location of fluid dispos				
Dual Completion	Docket No.		Operator Name:				
Other (SWD or Enhr.?) Docket No.			Lease Name: License No.:				
05/05/06	05/08/06		Quarter Sec				
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date	County:				
Kansas 6702, within 120 of Information of side two of 107 for confidentiality in e CEMENTINGTICKETS M	days of the spud date, red this form will be held con xcess of 12 months). On UST BE ATTACHED. So	completion, workover or co fidential for a period of 12 e copy of all wireline logs ubmit CP-4 form with all plu	e Kansas Corporation Comn onversion of a well. Rule 82 months if requested in writing and geologist well report sha ugged wells. Submit CP-11 e the oil and gas industry ha	-3-130, 82-3-106 and submitted wall be attached with form with all tem	and 82-3-107 a with the form (s h this form. Al nporarily aband	apply. see rule 82-3- LL doned wells.	
herein are complete and c	orrect to the best of my k	nowledge.					
Signature: Di alci Jandin			KC	C Office Use C	Only	,	
Signature.			V Latter of Confi	dontiality, Attacks	ı		
Title: Date 08/31/06			If Denied, Yes	dentiality Attached	Į		
Subscribed and sworn to b	pefore me this <u>3</u>	_ day of <u>UUQ</u>	ii belied, 163	Date.			
2006		\supset	Wireline Log R	eceived			
Notary Public:	to Leter	000	Geologist Repo	ort Received	RECE	:IVED	
Date Commission Expires	<u> </u>	2007	UIC Distributio	n	SEPAL	1-0b	
ANITA PE Notary Public - My Appt. Expires Oc	State of Kansas stober 1, 2009	,	-		KCCN		