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JUL 16 2004

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

KCC WICHITA

Form ACO-1  
September 1999

WELL COMPLETION FORM

Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE 15-129-21632-00-01

Operator: License # 5447  
 Name: OXY USA, Inc.  
 Address: P.O. Box 2528  
 City/State/Zip: Liberal, KS 67905  
 Purchaser: ONEOK  
 Operator Contact Person: Vicki Carder  
 Phone: (316) 629-4200  
 Contractor: Name: Best Well Service  
 License: NA  
 Wellsite Geologist: NA  
 Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd.  
 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: Hall P-3

Original Comp. Date: 04/30/01 Original Total Depth: 6730  
 Deepening  Re-perf.  Conv. To Enhr./SWD  
 Plug Back 6245 Plug Back Total Depth  
 Commingled Docket No. \_\_\_\_\_  
 Dual Completion Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?) Docket No. \_\_\_\_\_  
04/22/04 04/26/04  
 Spud Date or Date Reached TD Completion Date or  
 Recompletion Date Recompletion Date

API No. 15 - 129-21632-00-01  
 County: Morrow  
 - W/2 NE Sec. 6 Twp. 35 S. R. 40W  
625 feet from S  Line of Section  
1589 feet from E  Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE  SW  
 Lease Name: Hall P Well #: 3  
 Field Name: \_\_\_\_\_  
 Producing Formation: Morrow  
 Elevation: Ground: 3408 Kelly Bushing: 3418  
 Total Depth: 6730 Plug Back Total Depth: 6245  
 Amount of Surface Pipe Set and Cemented at 1864 feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set 3100'  
 If Alternate II completion, cement circulated from \_\_\_\_\_  
 feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

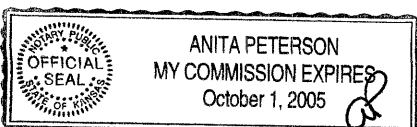
Drilling Fluid Management Plan  
 (Data must be collected from the Reserve Pit)  
 Chloride content 1100 ppm Fluid volume 1700 bbls  
 Dewatering method used Evaporation  
 Location of fluid disposal if hauled offsite:  
 Operator Name: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp, \_\_\_\_\_ S. R.  East  West  
 County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

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 Projects Date July 14, 2004  
 Subscribed and sworn to before me this 14th day of July  
 20 04  
 Notary Public: Anita Peterson  
 Date Commission Expires: Oct 1, 2005

KCC Office Use Only  
 Letter of Confidentiality Attached  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution



Side Two

Operator Name: OXY USA, Inc. Lease Name: Hall P Well #: 3  
 Sec. 6 Twp. 35 S. R. 40W  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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No  Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input 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							
Surface							
Production							

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ Plug off Zone	-			

Shots Per Foot	PERFORATION RECORD – Bridge Plugs Set/type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	CIBP @ 6245 w/ 2 sxs cmt		
4	5726-5731	Acidize – 500 gls 7 ½% FE Acid	

TUBING RECORD			Size NA	Set At NA	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. NA, TA'd Well				Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) TA'd		
Estimated Production Per 24 Hours	Oil BBLS NA	Gas Mcf NA	Water Bbls NA	Gas-Oil Ratio	Gravity	

Disposition of Gas  Vented  Sold  Used on Lease *(If vented, Submit ACO-18)*

METHOD OF COMPLETION  Open Hole  Perf.  Dually Comp.  Commingled \_\_\_\_\_

Other (Specify) TA'd

Production Interval \_\_\_\_\_