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KCC WICHITA

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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Form ACO-1

September 1999

Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

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: 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, WVSW, Expl, Cathodic, etc)  
 If Workover/Re-entry: Old Well Info as follows:  
 Operator: OXY USA, Inc.  
 Well Name: Winter Morrow Unit 105W

API No. 15 - 129-21741-0001  
 County: Morton  
 \_\_\_\_\_ - S/2 - SE - NW Sec 13 Twp 33 S. R. 43W  
 \_\_\_\_\_ 2218 feet from S (N) (circle one) Line of Section  
 \_\_\_\_\_ 1966 feet from E (W) (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE (NW) SW  
 Lease Name: Winter Morrow Unit Well #: 105W  
 Field Name: Winter  
 Producing Formation: Morrow/Osage  
 Elevation: Ground: 3572 Kelly Bushing: 3583  
 Total Depth: 5687 Plug Back Total Depth: 5680  
 Amount of Surface Pipe Set and Cemented at 1393 feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set 3208  
 If Alternate II completion, cement circulated from \_\_\_\_\_  
 feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Original Comp. Date: 10/05/04 Original Total Depth: 5687  
 \_\_\_\_\_ Deepening  Re-perf. \_\_\_\_\_ Conv. To Enhr./SWD  
 \_\_\_\_\_ Plug Back \_\_\_\_\_ Plug Back Total Depth  
 Commingled Docket No. DMP 100401  
 \_\_\_\_\_ Dual Completion Docket No. \_\_\_\_\_  
 \_\_\_\_\_ Other (SWD or Enhr.?) Docket No. \_\_\_\_\_  
04/13/05 05/03/05  
 Spud Date or Date Reached TD Completion Date or  
 Recompletion Date Recompletion Date

Drilling Fluid Management Plan ACT I WITH  
4-20-07  
 (Data must be collected from the Reserve Pit)  
 Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
 Dewatering method used \_\_\_\_\_  
 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.

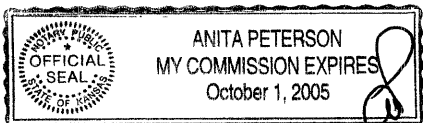
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Vicki Carder  
 Title: Capital Project Date August 9, 2005  
 Subscribed and sworn to before me this 9th day of Aug  
20 05  
 Notary Public: Anita Peterson  
 Date Commission Expires: Oct. 1, 2005

KCC Office Use Only

YES Letter of Confidentiality Attached  
 If Denied, Yes  Date: \_\_\_\_\_

\_\_\_\_\_ Wireline Log Received  
 \_\_\_\_\_ Geologist Report Received  
 \_\_\_\_\_ UIC Distribution



X

Side Two

Operator Name: OXY USA Inc. Lease Name: Winter Morrow Unit Well #: 105W

Sec. 13 Twp. 33 S. R. 43W  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 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							
Production							

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	4563-4614	C	100	Szq off perms from 4563-4614 w/100 sxs prem neat
<input type="checkbox"/> Plug Back TD				
<input checked="" 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 (Amount and Kind of Material Used)	Depth
4	5658-5685, 5610-5639	Acidize – 8500 gls 15% FE-MCA III	
6	4603-4614-4585-4599, 4563-4581	Acidize – 8600 gls MCA-FE	

TUBING RECORD	Size 2 3/8	Set At 4532	Packer At 4532	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil BBLS	Gas Mcf	Water Bbbs WSW	Gas-Oil Ratio	Gravity
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Disposition of Gas

METHOD OF COMPLETION

Production Interval

- Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled 5685-5610 Osage  
*(If vented, Submit ACO-18)*  Other (Specify) \_\_\_\_\_ 4603-4581 Morrow

