

ORIGINAL

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 5447
Name: OXY USA Inc.
Address: P.O. Box 2528
City/State/Zip: Liberal, KS 67905
Purchaser: Enron
Operator Contact Person: Vicki Carde
Phone: (620) 629-4200
Contractor: Name: Best Well Service
License: 38564 NA
Wellsite Geologist: NA
Designate Type of Completion:
New Well Re-Entry X Workover
Oil SWD SIOW Temp. Abd.
X Gas ENHR SIGW
Dry Other (Core, WSW, Expl, Cathodic, etc)
If Workover/Re-entry: Old Well Info as follows:
Operator: Lowery Exploration
Well Name: Hayward #8-1

API No. 15 - 129-21195-0003
County: Morton
C - NW - SE Sec 16 Twp. 35 S. R. 41W
1980 feet from S N (circle one) Line of Section
1980 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Hayward C Well #: 3
Field Name: Greenwood
Producing Formation: Chase
Elevation: Ground: 3508 Kelly Bushing: 3520
Total Depth: 6075 Plug Back Total Depth: 3300
Amount of Surface Pipe Set and Cemented at 1615 feet
Multiple Stage Cementing Collar Used? X Yes No
If yes, show depth set 2907
If Alternate II completion, cement circulated from
feet depth to w/ sx cmt.

Original Comp. Date: 11/11/93 Original Total Depth: 6075
Deepening X Re-perf. Conv. To Enhr./SWD
X Plug Back 3300 Plug Back Total Depth
Commingled Docket No.
Dual Completion Docket No.
Other (SWD or Enhr.?) Docket No.
08/27/04 09/03/04
Spud Date or Date Reached TD Completion Date or
Recompletion Date

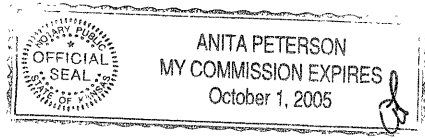
Drilling Fluid Management Plan OWWO 4-19-07
(Data must be collected from the Reserve Pit) Wtfr
Chloride content ppm Fluid volume bbls
Dewatering method used
Location of fluid disposal if hauled offsite:
Operator Name:
Lease Name: License No.:
Quarter Sec. Twp, S. R. East West
County: Docket No.:

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 Carde
Title: Capital Project Date January 3, 2005
Subscribed and sworn to before me this 3rd day of Jan.
20 05
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



ORIGINAL

Operator Name: OXY USA Inc. Lease Name: Hayward C Well #: 3  
 Sec. 16 Twp. 35 S. R. 41W  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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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					C		
Surface					C		
Production					C		

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				
<input type="checkbox"/> Plug Back TD				
<input 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 <i>(Amount and Kind of Material Used)</i>	Depth
	Set CIBP @ 3300' w/2 sxs cmt		
4	2373-2381, 2366-2368, 2356-2362, 2349-2351	2000 gls 15% HCL, 103,000 gls WF130 80Q foam	
4	2419-2421, 2425-2428		

TUBING RECORD	Size 2 3/8	Set At 2471	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 12/16/04	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil BBLs	Gas Mcf 23	Water Bbls 9	Gas-Oil Ratio Gravity

Disposition of Gas                      METHOD OF COMPLETION                      Production Interval

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