

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACD-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

ORIGINAL

163-21693-00-01

Operator: License # 09012

Name: OXY USA INC.

Address P.O. BOX 26100

City/State/Zip OKLAHOMA CITY, OK 73126-0100

Purchaser: _____

Operator Contact Person: RAYMOND HUI

Phone (405) 749-2471

Contractor: Name: Express Well service

License: _____

Wellsite Geologist: _____

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD S1OW Temp. Abd.
 Gas ENHR SIGW
 Dry WSW Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: Cities Service

Well Name: Kriley #4

Comp. Date 5/29/82 Old Total Depth 3398'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 1011 PSTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

2/11/92 2/11/92 2/28/92
Spud Date Date Reached TD Completion Date

API NO. 15- 163-21693-00-01
County Rooks
GE/2 - NW/4 SW/4 Sec. 22 Twp. 8S Rge. 18 E W
1980' Feet from S/W (circle one) Line of Section
4290' Feet from E/W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Harmony Hill Unit Well # 204S
Field Name Harmony Hill
Producing Formation Cedar Hills
Elevation: Ground 1907' KB 1912'
Total Depth 1041' PSTD 1011'
Amount of Surface Pipe Set and Cemented at 807' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cnt.
Drilling Fluid Management Plan 11-2
(Data must be collected from the Reserve Pit)
Not applicable
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 Rng. _____ E/W
County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, 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 on 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 VIC TUMLINSON VIC TUMLINSON

Title DRILLING OPERATIONS MANAGER Date 3/23/92

Subscribed and sworn to before me this 23rd day of March 1992.

Notary Public Kelley D. Andrews

Date Commission Expires 8/19/95

K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Geologist Report Received
MAR 26 1992
Distribution
KCC _____ SWD/Rep _____ NGPA
KGS _____ Plug _____ Other _____
(Specify)

3-26-92

PI

Operator Name OXY USA INC Lease Name Harmony Hill Unit Well # 204S
 Sec. 22 Twp. 8S Rge. 18 East West
 County Rooks

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Not applicable: re-entry well.	
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E.Logs Run:	Not applicable: Re-entry well		

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
Surface	12 1/4"	8 5/8"	24#	807'	(in place)	-	-
Production	7 7/8"	5 1/2"	14#	1036'	50/50 Poz	450	3% CC

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 (Amount and Kind of Material Used)	Depth
1 shot/2 ft.	Cedar Hills 940'-990'	Not acidized.	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Date of First, Resumed Production, SWD or Inj.		2 7/8"	952'					
2/28/92								
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	Water	Bbls.	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. Conningled Other (Specify) Water supply well.

Production Interval 940'-990'