

ORIGINAL

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

Operator: License # 5447

Name: OXY USA, Inc.

Address P.O. Box 2528

City/State/Zip Liberal, KS 67905

Purchaser: Clear Creek

Operator Contact Person: Kenny L. Andrew

Phone (316) 629-4232

Contractor: Name: BEST (COMPLETION)

License: _____

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: OXY USA, Inc.

Well Name: SCHNELLBACHER E #1 (WAS D#1)

Comp. Date 5-8-85 Old Total Depth 5650

Deepening Re-perf. Conv. to Inj/SWD

Plug Back 5394 PBDT

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

WO 11/24/99 1/11/85 1/14/00

Spud Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 Kenny Andrew
Title Engineering Technician Date 2/11/00

Subscribed and sworn to before me this 11th day of February,
19 2000

Notary Public Anita Peterson
Date Commission Expires Oct. 1, 2001

NOTARY PUBLIC, State of Kansas
ANITA PETERSON
My Appt. Exp. Oct. 1, 2001

API NO. 15-081-20349-0001

County HASKELL

SE-NW NW-NW- NW Sec. 25 Twp. 30S Rge. 34W

4646
4620 Feet from the South Line of the Section

4816
4620 Feet from the East Line of the Section

KCC GPS
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name SCHNELLBACHER E Well # 1

Field Name VICTORY

Producing Formation MARMATON

Elevation: Ground 2958 KB 2969

Total Depth 5650 PBDT 5493

Amount of Surface Pipe Set and Cemented at 1808 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 cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
WHM 6-28-07

Chloride content NA ppm Fluid volume NA bbls

Dewatering method used NA

Location of fluid disposal if hauled offsite:
NA

Operator Name NA

Lease Name NA License No. NA

Quarter Sec. Twp. S Rng. W

County _____ Docket No. _____

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received

Distribution
_____ KCC _____ SWD/Rep _____ NGPA
_____ KGS _____ Plug _____ Other
(Specify)

X

SIDE TWO

Operator Name OXY USA, Inc.

Lease Name SCHNELLBACHER E Well # 1 (WAS D #1)

Sec. 25 Twp. 30S Rge. 34W

County HASKELL

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 Take Yes No
(Attach Additional Sheets.)

Log Formation (Top), Depth and Datums Sample

Samples Sent to Geological Survey Yes No

Name	Top	Datum
SURFACE, CLAY & SAND	0	377
REDBED & SHALE	377	1295
GLORIETTA SAND	1295	1453
SHALE	1453	1785
ANHYDRITE	1785	1800
SHALE	1800	2815
LIME & SHALE	2815	5650

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:
DIL-SFLW/ GR CNL-FDCW/ GR & CALIPER
MICOLOGW/GR

CASING RECORD New 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	1808	PZ	650	2% CACL 1/2# D-29
					H	150	3% CACAL 1/4# D-29
Intermediate							
Production	7-7/8	5-1/2	15.5	5643	PZ	175	18% SALT, 2% GEL 1/4# D-29, 8% D-65
			14.0		C		

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top - Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate				
<input checked="" type="checkbox"/> Protect Casing	4071-4103	H	200	
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 SET @ 5394	
4	4776-4784	800 GALS 17% HCL	

TUBING RECORD Size 2-3/8" Set At 4790 Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 1/20/00 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	6	11	6	1.83	36.4

Disposition of Gas: _____ **METHOD OF COMPLETION** _____ Production Interval 4776-4784

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
(If vented, submit ACO-18.)

Other (Specify) _____