

ORIGINAL

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form ACO-1 September 1999

## WELL COMPLETION FORM WELL HISTORY – DESCRIPTION OF WELL & LEASE

Form	Must	Ве	Typed

	1122111010111	I TON OF WELL & ELFOL
Operator: License #	5447	API No. 15 - <u>081-20256</u>
Name:	OXY USA, Inc.	County: Haskell
Address:		<u>C - SE - NW Sec 2 Twp. 29 S. R 34W</u>
City/State/Zip:		3300 feet from S / N (circle one) Line of Section
Purchaser:	N/A	feet from E/W (circle one) Line of Section
Operator Contact Person:	Kenny Andrews	Footages Calculated from Nearest Outside Section Corner:
Phone: (620) 629	-4200	(circle one) NE SE NW SW
Contractor: Name: Bes	Well Service	Lease Name: Onion B Well #: 3
License:	N/A	Field Name: Eubank
Wellsite Geologist:	N/A	Producing Formation: Marmaton
Designate Type of Completion:		Elevation: Ground: 2977 Kelly Bushing: 2981
New Well	Re-Entry X Workover	Total Depth: 5500 Plug Back Total Depth: 4760
Oil SWD	SIOW Temp. Abd.	Amount of Surface Pipe Set and Cemented at 1823 feet
Gas <u>X</u> ENHR	,	Multiple Stage Cementing Collar Used? ☐ Yes⊠ No
Dry Other (Core, W\$W, Expl, Cathodic, etc)		If yes, show depth set
If Workover/Re-entry: Old Well Info		If Alternate II completion, cement circulated from
Operator: OXY U		feet depth tow/sx cmt.
Well Name: Onic		SX OIII.
Plug Back Commingled Dual Completion  X Other (SWD or Enhr.?)  3-30-07 09/30/02  Spud Date or Date Recompletion Date  INSTRUCTIONS: An original an two Kansas 6702, within 120 days of the Information of side two of this form w 107 for confidentiality in excess of 12 CEMENTINGTICKETS MUST BE AT	Plug Back Total Depth  Docket No.  E-27,273  Completion Date or Recompletion Date  copies of this form shall be filed with the spud date, recompletion, workover or completion of 12 months). One copy of all wireline logs TACHED. Submit CP-4 form with all processing the completion of the copy of	Drilling Fluid Management Plan  (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: License No.:  Lease Name: License No.:  Quarter Sec Twp, S. R East West  County: Docket No.:  The Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. 2 months if requested in writing and submitted with the form (see rule 82-3-130) and geologist well report shall be attached with this form. ALL blugged wells. Submit CP-111 form with all temporarily abandoned wells.
herein are complete and correct to the	<u> </u>	KCC Office Use Only
Signature:		·
Title: Production Lead	Date <u>09/20/2007</u>	Letter of Confidentiality Attached
Subscribed and sworn to before me t	his 30th day of SeDt.	If Denied, Yes Date:
20 OT O	uay of	Wireline Log Received
( to the		Geologist Report Received
Notary Public:	leloon	KANSAS CORPORATION COMMISS
Date Commission Expires:	1,2009	UIC Distribution
		SEP 7 & 2007

ANITA PETERSON

ANITA PETERSON

Notary Public - State of Kansas

My Appt. Expires October 1, 2009

CONSERVATION DIVISION WICHITA, KS