

**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

ORIGINAL

Operator: License # 5447
 Name: OXY USA, Inc.
 Address: P.O. Box 2528
 City/State/Zip: Liberal, KS 67905
 Purchaser: EI Paso Natural Gas
 Operator Contact Person: Vicki Carder
 Phone: (316) 629-4200
 Contractor: Name: Key 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, WSW, Expl, Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: OXY USA, Inc.
 Well Name: Molz A-1

Original Comp. Date: 11/25/47 Original Total Depth: 2700
 _____ Deepening Re-perf: _____ Conv. To Enhr./SWD:
 _____ Plug Back _____ Plug Back Total Depth
 _____ Commingled _____ Docket No. _____
 _____ Dual Completion _____ Docket No. _____
 _____ Other (SWD or Enhr.?) _____ Docket No. _____
04/10/01 04/10/01 04/17/01
 Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 093-00390-0001
 County: Kearny
NE - NE - SW Sec 3 Twp. 24 S. R. 35W
2540 feet from (S) N (circle one) Line of Section
2540 feet from E (W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW (SW)
 Lease Name: Molz A Well #: 1
 Field Name: Hugoton
 Producing Formation: Chase
 Elevation: Ground: 2997 Kelly Bushing: _____
 Total Depth: 2700 Plug Back Total Depth: 2634
 Amount of Surface Pipe Set and Cemented at 800 feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan OLDWDO KGR 7/10/07
 (Data must be collected from the Reserve Pit)
 Chloride content NA ppm Fluid volume NA bbls
 Dewatering method used NA
 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 Projects Date August 7, 2001
 Subscribed and sworn to before me this 7th day of August
01
 Notary Public: Anita Peterson
 Date Commission Expires: Oct. 1, 2001

KCC Office Use Only

_____ Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 _____ Wireline Log Received
 _____ Geologist Report Received
 _____ UIC Distribution

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

RECEIVED
AUG - 8 2001
 KCC WICHITA

Side Two

Operator Name: OXY USA, Inc. Lease Name: Molz A Well #: 1

Sec. 3 Twp. 24 S. R. 35W East West County: Kearny

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run: Gamma Correlation

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

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
Conductor					C		
Surface	12 1/4	8 5/8	22.7	800	B	400	
Production	7 7/8	5 1/2	14	2699	B	900	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
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
4	2472-2480	Frac-100000 Gals 80 Quality Foamed 20# gelled water.	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	2629		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	Producing Method
04/21/01	<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
		75	65		

Disposition of Gas Vented Sold Used on Lease
 (If vented, Submit ACO-18)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Other (Specify) _____

1005 5 - BUA

4/21/01