

2007-00-01 KCC 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: JAYHAWK

Operator Contact Person: Kenny L. Anderson

Phone (316) 629-4200

Contractor: Name: BORDERLINE (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: VICTORY LANSING 601 (Was Thunderbird 1-31)

Comp. Date 9-13-90 Old Total Depth 5700

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 4440 PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

WO 11/8/99 11/24/99
Spud Date Date Reached TD Completion Date

RECEIVED
STATE CORPORATION COMMISSION
FEB - 4 2000
CONSERVATION DIVISION
Wichita, Kansas

API NO. 081-206788801 (Was Thunderbird 1-31)

County HASKELL

N/2 - NW - NW Sec. 31 Twp. 30S Rge. 33W

4950 Feet from the South Line of the Section

4620 Feet from the East Line of the Section

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

Lease Name VICTORY LANSING UNIT Well # 601

Field Name VICTORY

Producing Formation LANSING

Elevation: Ground 2952 KB 2964

Total Depth 5700 PBTD 4440

Amount of Surface Pipe Set and Cemented at 1788 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) W/HM 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. _____

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 L. Anderson
Title Engineering Technician Date 2/13/00
Subscribed and sworn to before me this 3rd day of February,
1st 2000.
Notary Public Anita Peterson
Date Commission Expires Oct. 1, 2001

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)

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

SIDE TWO

Operator Name OXY USA, Inc.

Lease Name VICTORY LANSING UNIT Well # 601

Sec. 31 Twp. 30S Rge. 33W

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.) List All E.Logs Run: DUAL INDUCTION DUAL COMP POROSITY MICORESISTIVITY	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr><td>SAND & SHALE</td><td>0</td><td>460</td></tr> <tr><td>SAND & RED BED</td><td>460</td><td>1160</td></tr> <tr><td>RED BED & ANHY</td><td>1160</td><td>1788</td></tr> <tr><td>ANHY & SHALE</td><td>1788</td><td>2075</td></tr> <tr><td>SHALE & SAND</td><td>2075</td><td>2475</td></tr> <tr><td>LIME & SHALE</td><td>2475</td><td>2514</td></tr> <tr><td>SHALE</td><td>2514</td><td>2800</td></tr> <tr><td>LIME & SHALE</td><td>2800</td><td>5700</td></tr> <tr><td>ROTARY TOTAL DEPTH</td><td></td><td>5700</td></tr> </tbody> </table>	Name	Top	Datum	SAND & SHALE	0	460	SAND & RED BED	460	1160	RED BED & ANHY	1160	1788	ANHY & SHALE	1788	2075	SHALE & SAND	2075	2475	LIME & SHALE	2475	2514	SHALE	2514	2800	LIME & SHALE	2800	5700	ROTARY TOTAL DEPTH		5700
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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	1788	LIGHT WT H	585 150	2% CC
Intermediate					C C		
Production	7-7/8	5-1/2	14.5	5698	LIGHT WT PREMIUM	50 150	5# GILSONITE 1/4% SUPER-CBL, 3% KBL

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top - Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing	4040-4250	H	200	
<input type="checkbox"/> Plug Back TD	-			
<input type="checkbox"/> Plug Off Zone	-			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
	ALFA 10,000# CIBP		4450
4	4094-4105	350 GALS 7-1/2%	
4	4116-4120	150 GALS 7-1/2%	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8"	4168		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. 11/30/99 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	1	0	90	N/A	

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) _____