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AUG 19 2005
KCC WICHITA

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: Mesa
Operator Contact Person: Vicki Carder
Phone: (620) 629-4200
Contractor: Name: Best 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: Cities Service O&G Corp.
Well Name: Helmley B-1

Original Comp. Date: 02/20/85 Original Total Depth: 5650
 Deepening Re-perf. Conv. To Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. CO-040501
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
03/05/05 03/22/05
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 081-20334-0002
County: Haskell
SE - SE Sec 3 Twp. 29 S. R. 34W
660 feet from (S) N (circle one) Line of Section
710 feet from E (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Helmley B (was Moody C-4) Well #: 1
Field Name: Eubank
Producing Formation: Marmaton/Lansing
Elevation: Ground: 2980 Kelly Bushing: 2990
Total Depth: 5650 Plug Back Total Depth: 5175
Amount of Surface Pipe Set and Cemented at 1774 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 4790
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Workover NCR 8-14-08
(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: _____
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.

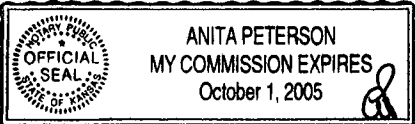
Signature: Vicki Carder
Title: Capital Project Date August 15, 2005
Subscribed and sworn to before me this 15 day of Aug
05
Notary Public: Anita Peterson
Date Commission Expires: Oct. 1, 2005

KCC Office Use Only
N/D Letter of Confidentiality Attached
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution



Operator Name: OXY USA Inc. Lease Name: Moody C Well #: 4

Sec. 3 Twp. 29 S. R. 34W East West County: Haskell

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input checked="" 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
Conductor					C		
Surface					C		
Production					C		

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	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
	Release Pkr, Set CIBP @ 5175	Acidize – 1500 gls 15% HCL MCA-FE	
4	4187-4191, 4160-4163	Acidize – 60 bbls 15% HCL, MCA-FE	

TUBING RECORD	Size 2 3/8	Set At 4706	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 03/28/05	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil BBLS 45	Gas Mcf	Water Bbls 85	Gas-Oil Ratio	Gravity
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Disposition of Gas

METHOD OF COMPLETION

Production Interval

- Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Lansing-4160-4494
(If vented, Submit ACO-18) Other (Specify) _____ Marmaton-4663-77