

**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: N/A  
 Operator Contact Person: Kenny Andrews  
 Phone: (620) 629-4232  
 Contractor: Name: Key Energy  
 License: \_\_\_\_\_  
 Wellsite Geologist: N/A  
 Designate Type of Completion:  
 \_\_\_\_\_ New Well \_\_\_\_\_ Re-Entry \_\_\_\_\_ X \_\_\_\_\_ Workover  
 \_\_\_\_\_ Oil \_\_\_\_\_ SWD \_\_\_\_\_ SIOW \_\_\_\_\_ Temp. Abd.  
 \_\_\_\_\_ Gas \_\_\_\_\_ X \_\_\_\_\_ ENHR \_\_\_\_\_ SIGW  
 \_\_\_\_\_ Dry \_\_\_\_\_ Other (Core, WSW, Expl, Cathodic, etc)  
 If Workover/Re-entry: Old Well Info as follows:  
 Operator: OXY USA, INC.  
 Well Name: WILBURTON MORROW SAND UNIT # 801 W

API No. 15 - 15-129-00065-0001  
 County: MORTON  
 \_\_\_\_\_ SE - NW Sec 32 Twp. 34 S. R. 41W  
 \_\_\_\_\_ 3300' 3303' feet from (S) N (circle one) Line of Section  
 \_\_\_\_\_ 3300' 3305' feet from (E) W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE (NW) SW  
 Lease Name: WILBURTON MORROW SAND UNIT Well #: 801W  
 Field Name: WILBURTON  
 Producing Formation: MORROW  
 Elevation: Ground: 3471 Kelly Bushing: 3481  
 Total Depth: 5402 Plug Back Total Depth: 4865  
 Amount of Surface Pipe Set and Cemented at 1461 feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set 3312  
 If Alternate II completion, cement circulated from \_\_\_\_\_  
 feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

CONSERVATION DIVISION

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KANSAS CORPORATION COMMISSION

FEB 25 2002

Original Comp. Date: 04/28/59 Original Total Depth: 5402  
 \_\_\_\_\_ Deepening \_\_\_\_\_ Re-perf. \_\_\_\_\_ X \_\_\_\_\_ Conv. To Enhr./SWD  
 \_\_\_\_\_ Plug Back \_\_\_\_\_ Plug Back Total Depth  
 \_\_\_\_\_ Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_  
 \_\_\_\_\_ Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_  
 \_\_\_\_\_ Other (SWD or Enhr.?) \_\_\_\_\_ Docket No. E-12.571  
 \_\_\_\_\_ 12/10/01 \_\_\_\_\_ 12/10/01 \_\_\_\_\_ 12/12/01  
 Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan OWWS EOR KGR 1/14/08  
 (Data must be collected from the Reserve Pit)  
 Chloride content N/A ppm Fluid volume N/A bbls  
 Dewatering method used N/A  
 Location of fluid disposal if hauled offsite:  
 Operator Name: N/A  
 Lease Name: N/A License No.: \_\_\_\_\_  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R.  East  West  
 County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

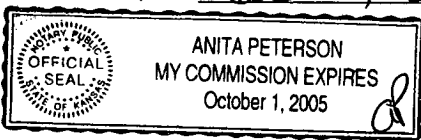
**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 6702, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of 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: [Signature]  
 Title: ENGINEERING TECHNICIAN Date 02/21/02  
 Subscribed and sworn to before me this 21<sup>st</sup> day of February  
 20 02  
 Notary Public: Anita Peterson  
 Date Commission Expires: Oct. 1, 2005

**KCC Office Use Only**

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



✓

X

Operator Name: OXY USA, Inc. Lease Name: WILBURTON MORROW SAND UNIT Well #: 801W  
 Sec. 32 Twp. 34 S. R. 41W  East  West County: MORTON

**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:  
 Same as previous ACO-1

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum  
 ON PREVIOUS ACO-1

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							
Surface	12-1/4"	8-5/8"	24	1461	C	650	
Production	7-7/8"	5-1/2"	14	5204	C	275	

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	4808-20		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8"	4779'	4779'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	Producing Method
02/18/02	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>Injection Well</u>

Estimated Production Per 24 Hours	Oil BBLS	Gas Mcf	Water Bbls	Gas-Oil Ratio	Gravity
	N/A	N/A	N/A	N/A	N/A

Disposition of Gas

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

METHOD OF COMPLETION

Open Hole  Perf.  Dually Comp.  Commingled INJECTION WELL  
 Other (Specify) \_\_\_\_\_

Production Interval