



AMENISED
ON MUN. 6/12,

Form ACO-1

September 1999

Form Must Be Typed

CORRECTED

Name:_____ Address:

License: _____

____ Dry

___ Plug Back __

02/23/2008

Spud Date or

Recompletion Date

X Commingled

____ Dual Completion

__ Other (SWD or Enhr.?)

Operator: _____
Well Name:

Designate Type of Completion:

To Correct Commingled intervals Bottom of page 2

Operator: License #

5447

P.O. Box 2528

Contractor: Name: Kenai Mid-Continent, Inc.

_____ Oil _____ SWD _____ SIOW ____ Temp. Abd.

34000

Other (Core, WSW, Expl, Cathodic, etc)

_____ Deepening _____ Re-perf. _____ Conv. To Enhr./SWD

03/04/2008

Date Reached TD

 City/State/Zip:
 Liberal, KS 67905

 Purchaser:
 ONEOK

 Operator Contact Person:
 Jarod Powell

 Phone:
 (620) 629-4200

Wellsite Geologist: Marvin T. Harvey, Jr.

X New Well Re-Entry

X Gas ____ ENHR ____ SIGW

If Workover/Re-entry: Old Well Info as follows:

Original Comp. Date: _____ Original Total Depth: ___

OXY USA Inc.

____ Workover

Plug Back Total Depth

Docket No. Pending

04/17/2008

Completion Date or

Recompletion Date

Docket No. ____

Docket No. ____

Kansas Corporation Commission Oil & Gas Conservation Division

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

API No. 15 - 175-22132-9000 0000					
County: Seward					
- <u>SW - SE - SW Sec 4</u> Twp. <u>34</u> S. R <u>33W</u>					
feet from S N (circle one) Line of Section					
feet from E (W) (circle one) Line of Section					
Footages Calculated from Nearest Outside Section Corner:					
(circle one) NE SE NW SW					
Lease Name: Graham B Well #: 4					
Field Name: Evalyn-Condit					
Producing Formation: Chester/Morrow					
Elevation: Ground: 2875 Kelly Bushing: 2887					
Total Depth: 6500 Plug Back Total Depth: 6403					
Amount of Surface Pipe Set and Cemented atfeet					
Multiple Stage Cementing Collar Used? ☐ Yes☐ No					
If yes, show depth set 3285					
If Alternate II completion, cement circulated from					
feet depth to w/ sx cmt.					
MITIKEBE					
Drilling Fluid Management Plan					
(Data must be collected from the Reserve Pit)					
Chloride content 1700 mg/ ppm Fluid volume 1600 bbls					
Dewatering method used <u>Evaporation</u>					
Location of fluid disposal if hauled offsite:					
Operator Name:					

Lease Name: _____ License No.: _____

_____ Docket No.: ____

Quarter ____ Sec. ___ Twp, ___ S. R. ___ East 🛛 West

INSTRUCTIONS: An original an 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 CEMENTINGTICKETS 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.		KCC Office Use Only
Signature:	У	
Title: Capital Assets Date June 18, 2008	/	_ Letter of Confidentiality Attached
Subscribed and sworn to before me this 18th day of June		If Denied, Yes Date:
20_00		_Wireline Log Received
Notary Public: TOUS JUJULE		_Geologist Report Received
Date Commission Expires:		_ UIC Distribution

NOTARY PUBLIC - State of Kansas

KATHLEEN R. POULTON

My Appt. Exp. 11-0-10

JUN 2 0 2008

KCC WICHITA



Side Two

Operator Name: _	OX	Y USA Inc.			Lease Name	: <u>Graha</u>	am B	Well #:	4	
Sec4	Гwp. <u>34</u> S.	R. <u>33W</u>	_ 🗆 :	East 🗌 West	County:		Seward		!	
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 copyof all Electric Wireline Logs surveyed. Attach final geological well site report.										
Drill Stem Tests Taken ☐ Yes ☐ No (Attach Additional Sheets)					□ Log	Formation (Top	p), Depth and	Datum	Sample	
Samples Sent to Geological Survey Yes No					Name Wellington S	NameTopDatumWellington Salt2202673				
Cores Taken		☐ Yes	⊠ No		Chase	Chase 2712 162				
Electric Log Run Yes No					Council Grov	Council Grove 3035 -160				
List All E. Logs Rur			Microlo	·	Wabaunsee					
Array Sonic	•	ompensate	d Resistiv	vity	· '	Topeka 3876 -1001			-1001	
Spectral De	nsity Dual Spaced	Neutron			Heebner			4325	-1450	
					Toronto			4367	-1492	
-					(See Side Th	nree) 				
Dumana of Chia	0:		all strings		urface, intermediat	e, production, etc				
Purpose of String	Size Hole Drilled	Size Ca Set(in. C		Weight Lbs./ft.	Setting Depth	Type of Cement	# Sacks Used		d Percent ditives	
Conductor						C .				
Surface	12 1/4	8 5/8		24	1693	C	500 200	A-Con + Additives Premium Common + Additives		
Production	7 7/8	5 1/2		17	6490	C C	165 (1 st Stg) 250(2 nd Stg)	50/50 Poz + Addit 50/50 Poz + Addit		
		,	ADDITIO	NAL CEMENTI	NG / SQUEEZE	RECORD				
Purpose:	Depth Top Bottom	Typ Cen	e of nent	#Sacks Use	d	Туј	pe and Percer	nt Additives	, , ,	
X Protect Casing	3192-3292	CI	_	200			-115: 150 sx F	Premium Neat	***	
Plug Back TD Plug off Zone	_ Plug Back TD			The state of the s						
Shots Per Foot PERFORATION RECORD – Bridge Plugs Set/type Specify Footage of Each Interval Perforated								Squeeze Record		
8	Specify 1 00	6022-60		enorated	Acid: 1600	(Amount and Kind of Material Used) Depth Acid: 1600 gals 17% FE Acid				
	0022-0030									
		_								
8 6114-6118, 6121-6132				Acid: 3000 gals 17% FE Acid						
					Frac: 66,000 gals 15# X-link w/75% N2 foam; 120,000# 20/40 Sand					
TUBING RECORD Size Set At Packer At 2 3/8 6150				Liner Run	Yes	No				
Date of First, Resumed Production, SWD or Enhr. 04/22/2008 Producing Method Flowing					owing 🔲 Pum	pina N G	as Lift Ot	ther (Explain)		
Estimated Production				Water		Gas-O		Gravity		
Per 24 Hours	0 229			2	•					
Disposition of Gas METHOD OF COMPLETION Production Interval										
☐ Vented ☐ Sold ☐ Used on Lease ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled Chester - 6114-6132 (If vented, Submit ACO-18)										
Other (Specify) Morrow-6022-6030										

COMPRESSION

Side Three

Operator Name:	OXY USA Inc.	Lease Name: Graham B	Well #:4
Sec. 4 Twp. 34	S. R. <u>33W</u>	County: Se	ward
		,	•
Name	Тор	Datum	
Lansing	4545	-1670	•
Kansas City	4883	-2008	
Marmaton	5188	-2313	
Cherokee	5422	-2547	
Atoka	5615	-2740	
Morrow	5812	-2937	
Chester	6060	-3185	
St. Genevieve	6411	-3536	

CONFIDENTIAL

RECEIVED
JUN 2 0 2008
KCC WICHITA