

CONFIDENTIAL

KANSAS CORPORATION COMMISSION

JUN 22 2009

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Form ACO-1
September 1999

Handwritten signature/initials

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form Must Be Filled
ORIGINAL

Operator: License # 5447
Name: OXY USA Inc.
Address: P.O. Box 2528
City/State/Zip: Liberal, KS 67905
Purchaser: _____
Operator Contact Person: Jarod Powell
Phone: (620) 629-4200
Contractor: Name: Best Well Service
License: 32564
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/Re-entry: Old Well Info as follows:
Operator: OXY USA, Inc.
Well Name: MLP Close "C" #1

Original Comp. Date: 03/06/01 Original Total Depth: 5950
 Deepening Re-perf. Conv. To Enhr./SWD
 Plug Back 5700 Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
11/18/2005 N/A 12/12/2005
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 189-22367-0001
County: Stevens
SE - SW Sec. 34 Twp. 31 S. R. 39W
484 feet from S / N (circle one) Line of Section
1961 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: MLP Close "C" Well #: 1
Field Name: Unknown
Producing Formation: Atoka
Elevation: Ground: 3231 Kelly Bushing: 3241
Total Depth: 5950 Plug Back Total Depth: 5700
Amount of Surface Pipe Set and Cemented at 1750 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 3064
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____

Drilling Fluid Management Plan
(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.: _____

Handwritten notes: 100-Dig-4/23/09

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: Jarod Powell
Title: Capital Projects Date June 17, 2009
Subscribed and sworn to before me this 17th day of June
20 09
Notary Public: Kathleen R. Poulton
Date Commission Expires: November 2, 2010

KCC Office Use Only
 Letter of Confidentiality Attached
If Denied, Yes Date: 7/17/09
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

NOTARY PUBLIC - State of Kansas
KATHLEEN R. POULTON
My Appt. Exp. 11-2-10

Side Two

Operator Name: OXY USA Inc. Lease Name: MLP Close "C" Well #: 1

Sec. 34 Twp. 31 S. R. 39W East West County: Stevens

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

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	1750	C	580	2% CC, 1/8# Polyflake
Production	7 7/8	5 1/2	15.5	5950	C	175	4# Calseal, 5# Gilsonite 10% Salt, 5% Halad 322

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	2500-3064	C	65	2% cc, 1/8# Polyflake (Port Collar)
<input type="checkbox"/> Plug Back TD				
<input checked="" 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 <i>(Amount and Kind of Material Used)</i>		Depth
	Set CIBP @ 5700				
4	5300-5370		Frac; with 30,000 lbs 100 Mesh & 83,010 lbs 30/70 sand		

TUBING RECORD	Size 2-3/8	Set At 5398	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 02/26/2009	Producing Method -> <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 0	Gas Mcf 0	Water Bbls 24	Gas-Oil Ratio Gravity

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	
	<input type="checkbox"/> Other (Specify)	



OXY USA Inc.
1701 N. Kansas, Liberal, KS 67901
P.O. Box 2528, Liberal, KS 67905-2528

June 17, 2009

KANSAS CORPORATION COMMISSION

JUN 22 2009
RECEIVED

Kansas State Corporation Commission
Conservation Division – Room 2078
Wichita State Office Building
130 S. Market
Wichita, KS 67202-3802

RE: MLP CLOSE "C" #1
SW/4 Sec-34 T31S R39W
Stevens County, KS
API # 15-189-22367

Dear Sir/Madam:

Please file confidential. The following form is being submitted for the above referenced well which was recompleted in 2005. I apologize for the length of time it has taken to file this form. Due to reorganization within OXY, this fell through the cracks.

IN KANSAS STATE FORM ACO-1

If there are any questions or you require further information, please contact me at the above address or by phone at (620) 629-4227.

Sincerely,

A handwritten signature in cursive script that reads "Jarod Powell".

Jarod Powell

Enclosures

Cc: OXY – Houston
OXY – Well File