

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 01 2007

CONSERVATION DIVISION
WICHITA, KS

SEP 27 2007

CONFIDENTIAL

ORIGINAL

9/27/08

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

September 1999

Form Must Be Typed

WELL COMPLETION FORM

CONFIDENTIAL

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5447
 Name: OXY USA Inc.
 Address: P.O. Box 2528
 City/State/Zip: Liberal, KS 67905
 Purchaser: ONEOK
 Operator Contact Person: Rafael Bacigalupo
 Phone: (620) 629-4229
 Contractor: Name: Best Well Service
 License: N/A 32564
 Wellsite Geologist: N/A
 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: Fulkerson B-2

API No. 15 - 129-21740-0000
 County: Morton
 - NW - SE - SE Sec 6 Twp. 35 S. R. 41W
1250 feet from (S) N (circle one) Line of Section
1250 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: Fulkerson B Well #: 2
 Field Name: Greenwood
 Producing Formation: Topeka/Wabaunsee
 Elevation: Ground: 3502 Kelly Bushing: 3518
 Total Depth: 3500 Plug Back Total Depth: 3340
 Amount of Surface Pipe Set and Cemented at 488 feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan NO NH 7-24-08
 (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: [Signature]
 Title: Capital Project Date 09/27/2007
 Subscribed and sworn to before me this 27th day of September
20 07
 Notary Public: [Signature]
 Date Commission Expires: November 8, 2010

KCC Office Use Only

Y Letter of Confidentiality Attached
 If Denied, Yes Date: _____

_____ Wireline Log Received
 _____ Geologist Report Received
 _____ UIC Distribution

NOTARY PUBLIC - State of Kansas
 KATHLEEN R. POULTON
 My Appt. Exp. 11-8-10

Operator Name: OXY USA Inc. Lease Name: Fulkerson B Well #: 2
 Sec. 6 Twp. 35 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" 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	Chase	2211	1307
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Krider	2228	1290
List All E. Logs Run:		Winfield	2280	1238
		Towanda	2358	1160
		Fort Riley	2406	1112
		Council Grove	2517	1001
		Wabaunsee	2891	627
		Shawnee	3167	351

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	12 1/4	8 5/8	24	488	C	150	35/65 poz + Additives
					C	100	Class C + Additives
Production	7 7/8	4 1/2	10.5	3498	C	320	Class C + Additives
					H	340	50/50 lite poz + Additive

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	3354-3364 (old)		
	CIBP @ 3340 w/2 sxs cmt		
4	3256-3258, 3232-3252, 3188-3198, 3146-3150 (old)		
4	2909-2911, 2892-2894 (old)		
4	3168-3176, 3153-3157, 3064-3068, 2934-2936, 2905-2919 (new)	4800 gals 15% HCl Acid + additives	

TUBING RECORD	Size 2 3/8	Set At 3300	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. 08/25/2007	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 0	Gas Mcf 24	Water Bbls 36	Gas-Oil Ratio	Gravity
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Disposition of Gas: Vented Sold Used on Lease *(If vented, Submit ACO-18)*

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: _____

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

September 27, 2007

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

KCC
SEP 27 2007
CONFIDENTIAL

RE: FULKERSON B-2
SE/4 Sec-6 T-35S R-41W
Morton County, Kansas

Dear Sir:

Please file confidential. Enclosed herewith please find ACO-1 for subject well, which was recently recompleted with additional perforations in the Wabaunsee zone.

If there are any questions or you require further information, please contact me at the above address or by phone at (620) 629-4229.

Sincerely,


Rafael Bucigalupo
Capital Projects

Enclosure

Cc: OXY – Houston
OXY – Well File

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