

CONFIDENTIAL

ORIGINAL

Amended to include
CIBP @ 3490'

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

9/11/08

Form ACO-1
September 1999

Form Must Be Typed

AMENDED

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) 629-4200
Contractor: Name: Murfin Drilling Co., Inc.
License: 30606
Wellsite Geologist: NA

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: _____
Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. To Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
05/22/2007 05/30/2007 07/09/2007
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 129-21805-00-00
County: Morton
 - NW - SW - NE Sec 7 Twp. 33S S. R. 43W
1775 feet from S / (circle one) Line of Section
2212.1 feet from / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Neill D Well #: 1
Field Name: Tomorrow
Producing Formation: Chester
Elevation: Ground: 3664 Kelly Bushing: 3675
Total Depth: 5200 Plug Back Total Depth: 3476
Amount of Surface Pipe Set and Cemented at 1431 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 ALT-F NH10-24-08
(Data must be collected from the Reserve Pit)
Chloride content 800 mg/l ppm Fluid volume 1450 bbls
Dewatering method used Evaporation
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: Production Lead Date 08/12/2008
Subscribed and sworn to before me this 12 day of Aug
20 08
Notary Public: Anita Peterson
Date Commission Expires: Oct. 1, 2009

KCC Office Use Only
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
AUG 13 2008

ANITA PETERSON
Notary Public - State of Kansas
My Appl. Expires October 1, 2009

CONSERVATION DIVISION
WICHITA, KS

Operator Name: OXY USA Inc. Lease Name: NEILL D Well #: 1

Sec. 7 Twp. 33 S. R. 43W 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: Cement Bond Log
 Microlog Delta-T Sonic
 Spectral Density Dual Spaced Neutron
 High Resolution Induction Directional Survey

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Wabaunsee	2699	976
Topeka	2928	747
Heebner	3254	421
Lansing	3393	282
Marmaton	3896	-221
Cherokee	4140	-465
Atoka	4223	-548
Morrow	4572	-897

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	1431	C	400	A-Con
					C	200	Class A + additives
Production	7 7/8	5 1/2	17	3671	C	150	A-Con
						140	50/50 Poz + additives

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	3398-3416'	3600 Gals 7.5% FE/MCA Acid	
	CIBP @ 3490 w/2 sx cmt on top		
4	3504-3521'	3400 Gals 7.5% FE/MCA Acid	

TUBING RECORD	Size N/A	Set At	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. N/A	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) TA'd
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Estimated Production Per 24 Hours	Oil BBLS N/A	Gas Mcf N/A	Water Bbls N/A	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
(If vented, Submit ACO-18)

METHOD OF COMPLETION Other (Specify) _____ TA'd _____

Production Interval _____

Side Three

Operator Name: OXY USA Inc. Lease Name: NEILL D Well #: 1

Sec. 7 Twp. 33 S. R. 43W East West County: Morton

<u>Name</u>	<u>Top</u>	<u>Datum</u>
S1	4604	-929
L1	4653	-978
L2	4700	-1025
L3	4736	-1061
Indian Belly	4858	-1183
S2	4932	-1257
Keyes	4957	-1282
Mississippian	5017	-1342
TD:	5200	

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KANSAS CORPORATION COMMISSION

AUG 13 2008

CONSERVATION DIVISION
WICHITA, KS



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

August 12, 2008

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

CONFIDENTIAL

RE: NEILL "D" #1
NE/4 Sec-7 T-33S T-43W
Morton County, Kansas
API NO: 15-129-21805-0000

Dear Sir:

Enclosed herewith please find corrected ACO-1 for subject well. The Cast Iron Bridge Plug at 3490' had not previously been included in the "Perforation Record" on page 2.

If there are any questions or you require further information, please contact me at the above address or by phone at (620) 629-4214.

Sincerely,

A handwritten signature in cursive script that reads "Vonda Freeman".

Vonda Freeman

Enclosure

Cc: OXY - Houston
OXY - Well File

RECEIVED
KANSAS CORPORATION COMMISSION

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CONSERVATION DIVISION
WICHITA, KS