

APR 23 2007

CONSERVATION DIVISION
WICHITA, KS

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1

September 1999

Form Must Be Typed

Operator: License # 5447
Name: OXY USA Inc.
Address: P.O. Box 2528
City/State/Zip: Liberal, KS 67905
Purchaser: NA
Operator Contact Person: Kenny Andrews
Phone: (620) 629-4200
Contractor: Name: _____
License: _____
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. _____
08/13/90 08/24/90 04/11/06
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

API No. 15 - 129-21052-00-0102
County: Morton
N/2 - SW - SW Sec 32 Twp. 31S S. R. 39W
660 423 feet from N (circle one) Line of Section
660 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Sullivan C Well #: 1
Field Name: East Kinsler Extension
Producing Formation: Morrow L/Keyes
Elevation: Ground: 3254 Kelly Bushing: 3265
Total Depth: 6000 Plug Back Total Depth: 5952
Amount of Surface Pipe Set and Cemented at 1726 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set DV @ 3081'
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____
600-22g-11/3/09

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.: _____

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 04/20/2007
Subscribed and sworn to before me this 20th day of April
07
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

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

Side Two

Operator Name: OXY USA Inc. Lease Name: Sullivan C Well #: 1

Sec. 32 Twp. 31 S. R. 39W 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	BCA	1740	1525
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Winfield	2482	783
List All E. Logs Run:		Heebner	3885	-620
		Morrow	5489	-2224
		Chester	5860	-2595

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	30	20"		41'	Redi Mix	12 yda	
Surface	12 1/4	8 5/8	24	1726'	C	700	6% Gel
Production	7 7/8	5 1/2	14	6002'	H H C	525 465 620	6% Gel Poz w/2% Gel Lite w/1/4# flo

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing	5458-5462	CI H	50	1% HALAD-322
<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	5458-5462	38 bbls 7.5% PAD-FE acid + additives	
4	5834-5848	148 bbls 7.5% PAD-FE acid + 30% Xylene & additives	

TUBING RECORD	Size 2 3/8	Set At 5903	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. 05/04/2006	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain) P&A</i>
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Estimated Production Per 24 Hours	Oil BBLS 0	Gas Mcf 27	Water Bbls 0	Gas-Oil Ratio	Gravity
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Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 5458-5848

(If vented, Submit ACO-18) Other *(Specify)* _____



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

April 20, 2007

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

RE: Sullivan C-1
SW/4 S-32 R-31S T-39W
Morton County, Kansas
Commingling ID # CO 020603

Dear Sir:

It appears that, due to an oversight, the ACO-1 was never filed to reflect the commingling in 2006 of subject well, and we are enclosing herewith said document.

If there are any questions or you require further information, please contact me at the above address or by phone at (620) 629-4232.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kenny Andrews", written in black ink.

Kenny Andrews
Production Lead

Enclosure

Cc: OXY - Houston
OXY - Well File

RECEIVED
KANSAS CORPORATION COMMISSION

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