

RECEIVED
CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

JUL 07 2010

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

7/1/10

OPERATOR: KCC WICHITA

Name: OXY USA, INC.

Address 1: 5 E GREENWAY PLAZA

Address 2: P.O. BOX 27570

City: HOUSTON State: TX Zip: 77227 + 7570

Contact Person: LAURA BETH HICKERT

Phone: (620) 629-4253

CONTRACTOR: License # 33784

Name: TRINIDAD DRILLING LIMITED PARTNERSHIP

Wellsite Geologist: _____

Purchaser: PLAINS MARKETING

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., 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 Conv. to SWD
- Conv. to GSW

Plug Back: _____ Plug Back Total Depth _____

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

ENHR Permit #: _____

GSW Permit #: _____

03/13/2010 03/19/2010 04/09/2010

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 081-21896-00-00

Spot Description: _____

SW NW SE NE Sec. 4 Twp. 27 S. R. 33 East West

1,670 Feet from North / South Line of Section

1,142 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: HASKELL

Lease Name: HARDWICK A Well #: 1

Field Name: _____

Producing Formation: MORROW

Elevation: Ground: 2930 Kelly Bushing: 2943

Total Depth: 5346 Plug Back Total Depth: 5273

Amount of Surface Pipe Set and Cemented at: 1924 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 2400 ppm Fluid volume: 1400 bbls

Dewatering method used: HAULED OFFSITE

Location of fluid disposal if hauled offsite: _____

Operator Name: WEST SUNSET DISPOSAL LLC

Lease Name: ROHER 2-I License #: 32462

Quarter SE Sec. 36 Twp. 34 S. R. 36 East West

County: STEVENS Permit #: 15-189-20947-00-01

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, 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.

AFFIDAVIT

I am the affiant and I hereby certify that 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: Laura Beth Hickert

Title: Admin Assisot Regulatory Date: 7/2/10

KCC Office Use ONLY

Letter of Confidentiality Received

Date: 7-1-10 - 7/1/10

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: _____ Date: _____