

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

WELL COMPLETION FORM
WELL HISTORY DESCRIPTION OF WELL & LEASE

7/6/11

OPERATOR: License # 5447
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: TEXON L.P.

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 #: _____

03/12/2010	03/19/2010	04/15/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 067-21702-00-00

Spot Description: _____
SE NE SW NW Sec. 18 Twp. 30 S. R. 38 East West
1,967 Feet from North / South Line of Section
1,034 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: GRANT
Lease Name: NAVE A Well #: 1
Field Name: LITTLE BOW
Producing Formation: ST. LOUIS
Elevation: Ground: 3120 Kelly Bushing: 3131
Total Depth: 5854 Plug Back Total Depth: 5811
Amount of Surface Pipe Set and Cemented at: 1720 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: 1500 ppm Fluid volume: 1400 bbls
Dewatering method used: HAULED OFFSITE
Location of fluid disposal if hauled offsite: _____
Operator Name: HAYDEN OPERATING
Lease Name: LIZ SMITH License #: 33562
Quarter NE Sec. 26 Twp. 30 S. R. 34 East West
County: HASKELL Permit #: 15-081-20272-00-01

RECEIVED
JUL 09 2010
KCC WICHITA

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 ASSIST REGULATORY Date: 07/06/2010

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____