

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

RECEIVED ORIGINAL

AUG 31 2010

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

KCC WICHITA

8/30/12

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

API No. 15 - 081-21212-00-01  
Spot Description: \_\_\_\_\_  
NE SE NW NE Sec. 3 Twp. 28 S. R. 34  East  West  
963 Feet from  North /  South Line of Section  
1,613 Feet from  East /  West Line of Section

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

Lease Name: STOCKHAM A Well #: 1  
Field Name: EUBANK

Producing Formation: MORROW  
Elevation: Ground: 3073 Kelly Bushing: 3086  
Total Depth: 5740 Plug Back Total Depth: 5587  
Amount of Surface Pipe Set and Cemented at: 1729 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: 20,000 ppm Fluid volume: 400 bbls  
Dewatering method used: AIR EVAPORATION  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

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: OXY USA, INC.  
Well Name: STOCKHAM A-1  
Original Comp. Date: 08/08/1998 Original Total Depth: 5740  
 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 #: \_\_\_\_\_  
05/03/2010 05/05/2010 06/14/2010  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

**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: Regulatory Date: 8/30/10

**KCC Office Use ONLY**  
 Letter of Confidentiality Received Date: 8/30/10 - 8/30/12  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_