



CONFIDENTIAL

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5447
 Name: OXY USA Inc.
 Address 1: 5 E GREENWAY PLZ
 Address 2: PO 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: N/A
 Purchaser: ANADARKO

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 #: _____

<u>07/19/2010</u>	<u>07/30/2010</u>	<u>08/30/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-129-21919-00-00
 Spot Description: _____
NE NE SE Sec. 29 Twp. 32 S. R. 39 East West
2,310 Feet from North / South Line of Section
330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Morton
 Lease Name: BAKER C Well #: 1
 Field Name: KINSLER
 Producing Formation: MORROW
 Elevation: Ground: 3172 Kelly Bushing: 3185
 Total Depth: 6085 Plug Back Total Depth: 5994
 Amount of Surface Pipe Set and Cemented at: 1687 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: 1600 ppm Fluid volume: 1550 bbls
 Dewatering method used: Hauled to Disposal
 Location of fluid disposal if hauled offsite:
 Operator Name: NICHOLS FLUID SERVICE INC.
 Lease Name: JOHNSON License #: 31983
 Quarter NW Sec. 16 Twp. 34 S. R. 32 East West
 County: SEWARD Permit #: D27805

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.

Submitted Electronically

KCC Office Use ONLY	
<input checked="" type="checkbox"/> Letter of Confidentiality Received	Date: <u>11/10/2010</u>
<input type="checkbox"/> Confidential Release Date:	_____
<input checked="" type="checkbox"/> Wireline Log Received	
<input type="checkbox"/> Geologist Report Received	
<input type="checkbox"/> UIC Distribution	
ALT <input checked="" type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III	Approved by: <u>NAOMI JAMES</u> Date: <u>11/10/2010</u>