

CONFIDENTIAL

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

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

OPERATOR: License # 5447	API No. 15
Name: OXY USA Inc.	Spot Description:
Address 1: 5 E GREENWAY PLZ	NW_SW_SW_SE_ Sec. 28 Twp. 32 S. R. 39 ☐ East 🗸 West
Address 2: PO BOX 27570	430 Feet from North / South Line of Section
City: HOUSTON State: TX Zip: 77227 + 7570	
Contact Person: LAURA BETH HICKERT	Footages Calculated from Nearest Outside Section Corner:
Phone: (<u>620</u>) <u>629-4253</u>	□ne □nw ☑se □sw
CONTRACTOR: License #_33784	County: Morton
Name: Trinidad Drilling Limited Partnership	Lease Name: STECKEL FARMS A Well #: 1
Wellsite Geologist: N/A	Field Name: UNNAMED
Purchaser:	Producing Formation: MORROW
Designate Type of Completion:	Elevation: Ground: 3214 Kelly Bushing: 3227
✓ New Well Re-Entry Workover	Total Depth: 6197 Plug Back Total Depth: 6106
□ Oil □ WSW □ SWD □ SIOW	Amount of Surface Pipe Set and Cemented at: 1668 Feet
✓ Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Fluid Management Plan
Well Name:	(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: 1300 ppm Fluid volume: 1500 bbls
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Dewatering method used: Hauled to Disposal
Conv. to GSW	
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name: NICHOLS FLUID SERVICE
Dual Completion Permit #:	Lease Name: JOHNSON License #: 31983
SWD Permit#:	Quarter NW Sec. 16 Twp. 34 S. R. 32 East West
ENHR Permit #:	County: SEWARD Permit #: D27805
GSW Permit #:	
08/14/2010 08/24/2010 09/03/2010 Spud Date or Date Reached TD Completion Date or	
Recompletion Date Recompletion Date Recompletion Date	

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		
Letter of Confidentiality Received Date: 12/10/2010		
Confidential Release Date: Wireline Log Received Geologist Report Received UIC Distribution ALT	2010	