



KANSAS CORPORATION COMMISSION

1049643

Form ACO-1

June 2009

CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

Form Must Be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM**WELL HISTORY - DESCRIPTION OF WELL & LEASE**OPERATOR: License # 5447Name: OXY USA Inc.Address 1: 5 E GREENWAY PLZAddress 2: PO BOX 27570City: HOUSTON State: TX Zip: 77227 + 7570Contact Person: LAURA BETH HICKERTPhone: (620) 629-4253CONTRACTOR: License # 30606Name: Murfin Drilling Co., Inc.Wellsite Geologist: N/APurchaser: N/A

Designate Type of Completion:

- ☐ New Well ☐ Re-Entry ☒ Workover
☐ Oil ☐ WSW ☐ SWD ☐ SLOW
☐ 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: NEILL D-1Original Comp. Date: 07/09/2007 Original Total Depth: 5200

- ☐ 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 #: _____

11/16/2010 11/23/2010

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion DateAPI No. 15 - 15-129-21805-00-02

Spot Description: _____

SE NW SW NE Sec. 7 Twp. 33 S. R. 43 ☐ East ☒ West3,549 Feet from ☐ North / ☒ South Line of Section2,183 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW
County: MortonLease Name: NEILL D Well #: 1 SWDField Name: TURMORROWProducing Formation: LANSINGElevation: Ground: 3664 Kelly Bushing: 3675Total Depth: 5200 Plug Back Total Depth: 3490Amount of Surface Pipe Set and Cemented at: 1431 FeetMultiple 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: 800 ppm Fluid volume: 1450 bblsDewatering method used: Evaporated

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

County: _____ Permit #: _____

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 ReceivedDate: 01/19/2011☐ Confidential Release Date: _____☐ Wireline Log Received☐ Geologist Report Received☒ UIC DistributionALT ☒ I ☐ II ☐ III Approved by: NAOMI JAMES Date: 01/24/2011