

FORM MUST BE TYPED

SIDE ONE

ORIGINAL

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 26100

City/State/Zip Oklahoma City, Ok 73126-0100

Purchaser: Citgo Petroleum

Operator Contact Person: ~~XXXXXX~~ Raymond Hui

Phone (405) 749-2309

Contractor: Name: Duke Drilling Co.

License: 5929

Wellsite Geologist: -- Harold Trapp

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

4-28-96 5-4-96 5-22-96
Spud Date Date Reached TD Completion Date

API NO. 15-051-24923
County Ellis
- - NE - NW Sec. 26 Twp. 11S Rge. 17 X W
575 Feet from X N (circle one) Line of Section
1770 Feet from X W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
XX, SE, XX or XX (circle one)

Lease Name Hall B Well # 27

Field Name Bemis

Producing Formation Arbuckle

Elevation: Ground 2075' KB 2084

Total Depth 3536' PBTB 3536'

Amount of Surface Pipe Set and Cemented at 309 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 ALT 1 976 1-24-97
(Data must be collected from the Reserve Pit)

Chloride content 1200 ppm Fluid volume 2800 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

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 on 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.

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 Raymond Hui

Title Staff Analyst Date 6-06-96

Subscribed and sworn to before me this 6th day of June 19 96.

Notary Public Kay Ann Kilmer

Date Commission Expires 5-2-98

RECEIVED
JUN 10 1996
CONSERVATION DIVISION
WICHITA, KS

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
 Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

Operator Name OXY USA Inc. Lease Name Hall B Well # 27
 Sec. 17 Twp. 11S Rge. 17 East County Ellis
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets:)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

List All E.Logs Run:

Ran DIFL/GR/SP and CNL-LDT/PE/GR
 caliper and Microlog

Log Formation (Top), Depth and Datums Sample

Name	Top	Datum
Oread	3164'	-1080
Plattsmouth	3188'	-1104
Heebner	3226'	-1142
Toronto	3248'	-1164
LKC	3272'	-1188
Arbuckle	3537'	-1553

CASING RECORD

New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	24 #	309	C1-A	250	3% Ca Cl.
Production	7 7/8"	5 1/2"	14 #	3535	C1-A	490	2% Ca Cl.

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	
		Amount	Depth
OH	Arbuckle 3535' - 3536'	Not acidized	

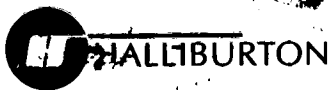
TUBING RECORD		Size <u>2 7/8"</u>	Set At <u>3504'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>5-22-96</u>			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil <u>8</u> Bbls.	Gas <u>Mcf</u>	Water <u>349</u> Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease (If vented, submit ACO-18.)
 Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

Mid Continent
Hug. B.

BILLED ON TICKET NO. *915325*

CUSTOMER

Org USA

LEASE

Hill B

WELL NO.

27

JOB TYPE

Surface

DATE

4-29-96

WELL DATA

FIELD _____ SEC. *26* TWP. *11S* RNG. *17W* COUNTY *Ellis* STATE *Ks.*

FORMATION NAME _____ TYPE _____
 FORMATION THICKNESS _____ FROM _____ TO _____
 INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD
 PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD
 COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____
 PACKER TYPE _____ SET AT _____
 BOTTOM HOLE TEMP. _____ PRESSURE _____
 MISC. DATA _____ TOTAL DEPTH *310*

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<i>N</i>		<i>8 7/8"</i>	<i>118</i>	<i>309</i>	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

ORIGINAL

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <i>4-29-96</i>	DATE <i>4-29-96</i>	DATE <i>4-29-96</i>	DATE <i>4-29-96</i>
TIME <i>0100</i>	TIME <i>0300</i>	TIME <i>0540</i>	TIME <i>0700</i>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG <i>LA-11</i>	<i>8 7/8"</i>	<i>1 H&CO</i>
HEAD		
PACKER		
OTHER		

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL. °API
 DISPL. FLUID _____ DENSITY _____ LB/GAL. °API
 PROP. TYPE _____ SIZE _____ LB.
 PROP. TYPE _____ SIZE _____ LB.
 ACID TYPE _____ GAL. _____ %
 ACID TYPE _____ GAL. _____ %
 ACID TYPE _____ GAL. _____ %
 SURFACTANT TYPE _____ GAL. _____ IN
 NE AGENT TYPE _____ GAL. _____ IN
 FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN
 GELLING AGENT TYPE _____ GAL.-LB. _____ IN
 FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN
 BREAKER TYPE _____ GAL.-LB. _____ IN
 BLOCKING AGENT TYPE _____ GAL.-LB. _____
 PERFPAC BALLS TYPE _____ QTY. _____
 OTHER _____
 OTHER _____

DEPARTMENT *Cent.*
 DESCRIPTION OF JOB *Cent. 8 7/8" Surface Cng*

JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE *X J. D. Average*

RECEIVED

HALLIBURTON OPERATOR *Roy* WARRANTS OPERATOR COMMISSION REQUESTED

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<i>250</i>	<i>Standard</i>		<i>B</i>	<i>3%CC, 4" Flocc</i>	<i>1.18</i>	<i>15.6</i>

CONSERVATION DIVISION
WICHITA, KS

PRESSURES IN PSI

CIRCULATING _____ DISPLACEMENT _____
 BREAKDOWN _____ MAXIMUM _____
 AVERAGE _____ FRACTURE GRADIENT _____
 SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN. _____
 HYDRAULIC HORSEPOWER _____
 ORDERED _____ AVAILABLE _____ USED _____
 AVERAGE RATES IN BPM _____
 TREATING _____ DISPL. _____ OVERALL _____
 CEMENT LEFT IN PIPE _____
 FEET *20* REASON *Requested*

SUMMARY

VOLUMES

PRESLUSH: BBL.-GAL. _____ TYPE _____
 LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 TREATMENT: BBL.-GAL. _____ DISPL. *BBL* GAL. *18.5*
 CEMENT SLURRY: *BBL* GAL. *52.5*
 TOTAL VOLUME: BBL.-GAL. _____

REMARKS

See Ch. T T Job Log
Thank You Roy

FIELD OFFICE



JOB LOG HAL-2013-C

DATE 4-29-96 PAGE NO. 1
TICKET NO. 915325

CUSTOMER Oxy USA WELL NO. 27 LEASE Hall B JOB TYPE Surface

TIME	DEPTH	TEMP	PUMP	PRESSURE	REMARKS
0100					Called out
0300					ankle set up Rig @ 281" lost circulation
0410					T.D. pull A.P. out of hole
					Rig up to Ann 8 7/8" Surface csg.
0440					Start Csg. in hole
0530					on Bottom Circulate
0540	6				Start mixing cat. 250 lbs lost circulation while mixing
0550	52.5				Finished mixing Release Top Plug D. pl. had slight circulation
0600	18.5				Plug down Cnd. did not circ. wash & Rack up
0700					Job Complete

ORIGINAL

RECEIVED
KANSAS CORPORATION COMMISSION

JUN 10 1996

CONSERVATION DIVISION
WICHITA, KS

Handwritten signature/initials