



KANSAS CORPORATION COMMISSION 1067018
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

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 # 34602
Name: Key Energy Services, LLC
Wellsite Geologist: N/A
Purchaser: _____

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: PIERCE B 3

Original Comp. Date: 09/16/2001 Original Total Depth: 5525

- 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>08/30/2011</u>	<u>09/12/2011</u>
Spud Date or Recompletion Date	Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-081-21419-00-01

Spot Description: _____

NW SE NE SW Sec. 31 Twp. 27 S. R. 33 East West
1674 Feet from North / South Line of Section
2271 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Haskell

Lease Name: BRANSTETTER CHESTER UNIT Well #: 303W

Field Name: _____

Producing Formation: MORROW

Elevation: Ground: 3029 Kelly Bushing: 3042

Total Depth: 5525 Plug Back Total Depth: 5450

Amount of Surface Pipe Set and Cemented at: 1753 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 3282 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: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

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 Received
Date: 11/08/2011
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 11/09/2011