



KANSAS CORPORATION COMMISSION 1084593
 OIL & GAS CONSERVATION DIVISION

Form ACO-1
 June 2009

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form Must Be Typed
 Form must be Signed
 All blanks must be Filled

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: 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: PRESCO WESTERN LLC
 Well Name: LC BLACK 1-417
 Original Comp. Date: 01/20/2005 Original Total Depth: 5273
 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>02/15/2012</u>	<u>03/16/2012</u>
Spud Date or Recompletion Date	Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-081-21559-00-01
 Spot Description: 90' E & 90' S OF NWNW
NW SE NW NW Sec. 17 Twp. 30 S. R. 33 East West
750 Feet from North / South Line of Section
750 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Haskell
 Lease Name: L C BLACK Well #: 1-417
 Field Name: LEMON VICTORY
 Producing Formation: LANSING & MARMATON
 Elevation: Ground: 2960 Kelly Bushing: 2971
 Total Depth: 5273 Plug Back Total Depth: 5222
 Amount of Surface Pipe Set and Cemented at: 1772 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: 3008 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: 06/14/2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NAOMI JAMES Date: 06/14/2012