



KANSAS CORPORATION COMMISSION 1088470
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

CONFIDENTIAL

WELL COMPLETION FORM

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

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 # 34660
Name: Aztec Well Servicing Co.
Wellsite Geologist: N/A
Purchaser: _____

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: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____

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>03/27/2012</u>	<u>03/31/2012</u>	<u>05/16/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-055-22131-00-00
Spot Description: _____
SW SW NW Sec. 17 Twp. 22 S. R. 34 East West
2310 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Finney
Lease Name: SHELL B Well #: 2
Field Name: AMAZON DITCH
Producing Formation: LNSG, KC, MARM, ATOKA, ST. GEN.
Elevation: Ground: 2977 Kelly Bushing: 2988
Total Depth: 5085 Plug Back Total Depth: 5028
Amount of Surface Pipe Set and Cemented at: 1820 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

(Data must be collected from the Reserve Pit)

Chloride content: 4000 ppm Fluid volume: 800 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite: _____
Operator Name: NICHOLS FLUID SERVICES
Lease Name: JOHNSON License #: 31983
Quarter NW Sec. 16 Twp. 34 S. R. 32 East West
County: SEWARD Permit #: D27805

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: 07/24/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 07/25/2012