



KANSAS CORPORATION COMMISSION 1090521
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 # 34663
Name: Union Drilling, Inc.
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: _____
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>04/20/2012</u>	<u>04/25/2012</u>	<u>05/25/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-081-21974-00-00

Spot Description:
SE NW NE SE Sec. 23 Twp. 29 S. R. 33 East West
2008 Feet from North / South Line of Section
701 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Haskell

Lease Name: BENSON B Well #: 2

Field Name: LEMON NORTHEAST

Producing Formation: KANSAS CITY CHEROKEE ATOKA

Elevation: Ground: 2926 Kelly Bushing: 2944

Total Depth: 5900 Plug Back Total Depth: 5841

Amount of Surface Pipe Set and Cemented at: 1770 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: 4500 ppm Fluid volume: 800 bbls

Dewatering 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 Received
Date: 08/14/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: Deanna Garrison Date: 08/16/2012