CONFIDENTIAL

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

Form ACO-1 June 2009

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

## **WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE**

DPERATOR: License #54	47		API No. 15
Name: OXY USA Inc.			Spot Description:
Address 1: 5 E GREENWAY PLZ Address 2: PO BOX 27570			NE_SE_SW_SE_Sec. 8 Twp. 30 S. R. 33 East  West  646 Feet from North / South Line of Section
Contact Person: LAURA B		P'	Footages Calculated from Nearest Outside Section Corner:
Phone: ( 620 ) 629-42	53		□NE □NW ☑SE □SW
CONTRACTOR: License #			County: Haskell
Name: Aztec Well Servicing Co.			Lease Name: ELIZABETH A. COX Well #: 8
Wellsite Geologist: N/A			Field Name: VICTORY
Purchaser: N/A			Producing Formation: N/A
Designate Type of Completio			Elevation: Ground: 2965 Kelly Bushing: 2976
	Re-Entry	Workover	Total Depth: 3285 Plug Back Total Depth: 2672
	,,,,,,,,,,,		Amount of Surface Pipe Set and Cemented at: 1791 Feet
Oil WSW	,	☐ SIOW ☐ SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ✓ No
Gas D&A	☐ ENHR	Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Methane	C	Last Temp. Abd.	
Cathodic ✓ Other	(Core. Expl., etc.): O	RIGINAL WELLBORE FOR SIDETRACK	If Alternate II completion, cement circulated from:  feet depth to:
If Workover/Re-entry: Old W			teet depth to:sx cmi.
Operator:			
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:			
		o ENHR Conv. to SWD	Chloride content: 2500 ppm Fluid volume: 600 bbls
	Conv. 1	Valence	Dewatering method used: Hauled to Disposal
Plug Back:	PI	ug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled			Operator Name: NICHOLS FLUID SERVICES
Dual Completion	Permit #:		Lease Name: JOHNSON License #: 31983
SWD	Permit #:		Quarter NW Sec. 16 Twp. 34 S. R. 32 East West
ENHR	Permit #:		County: SEWARD Permit #: D27805
GSW	Permit #:	THE RESERVE OF THE PERSON OF T	County: Permit #:
	2/12/2012	03/13/2012	
Spud Date or Date Reached TD Recompletion Date		Completion Date or Recompletion Date	

## **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** 

Recompletion Date

KCC Office Use ONLY
Letter of Confidentiality Received  Date: 06/06/2012
Confidential Release Date:  ✓ Wireline Log Received
Geologist Report Received
☐ UIC Distribution  ALT