

KANSAS CORPORATION COMMISSION 1100345 Oil & Gas Conservation Division CONFIDENTIAL

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 # 5447	API No. 15 - 15-129-20002-00-01
Name: OXY USA Inc.	Spot Description:
Address 1: 5 E GREENWAY PLZ	S2_N2_NW_SW_Sec13_Twp33_SR43East
Address 2: PO BOX 27570	1999 Feet from North / South Line of Section
City: HOUSTON State: TX Zip: 77227 + 7570	660 Feet from East / ✔ West Line of Section
City:         HODSTON         State:         IA         Zip:         + 100           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         SIOW           Gas         D&A         ENHR         SIGW	Footages Calculated from Nearest Outside Section Corner:  NE NW SE SW  County: Morton  Lease Name:  WINTER MORROW UNIT Well #: 203  Field Name: WINTER NORTH  Producing Formation: MORROW  Elevation: Ground: 3578 Kelly Bushing: 3587  Total Depth: 4800 Plug Back Total Depth: 4690  Amount of Surface Pipe Set and Cemented at: 1346 Feet  Multiple Stage Cementing Collar Used? Yes No
OG GSW Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core. Expl., etc.):	feet depth to: sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator: OXY USA, INC.  Well Name: WEATHERFORD B-3	Drilling Fluid Management Plan
Well Name: WEATHERFORD B-3  Original Comp. Date: 04/14/1981 Original Total Depth: 4800  □ Deepening  Re-perf. □ Conv. to ENHR □ Conv. to SWD □ Conv. to GSW	(Data must be collected from the Reserve Pit)  Chloride content: ppm Fluid volume: bbls  Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec. Twp. S. R. East Wes
ENHR Permit #:	County: Permit #:
07/16/2012 08/02/2012	
Spud Date or Date Reached TD 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

	KCC Office Use ONLY	
<b>√</b>	Letter of Confidentiality Received Date: 11/08/2012	
	Confidential Release Date:	
	Wireline Log Received	
	Geologist Report Received	
AL	UIC Distribution  T I III Approved by: NAOMI JAMES Date: 11/13/2012	