

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**

| OPERATOR: License # 5447 | | | API No. 15 - 15-175-22201-00-00 | | | | |
|---|--------------|--|--|--------------------------------|--|---------|-------------------------------|
| OXY USA Inc. | | | Spot Description: | | | | |
| Address 1: 5 E GREENWAY PLZ | | | SW_NE_NE_SW_Sec30_ Twp32_S. R34East | | | | |
| Address 2: PO BOX 27570 City: HOUSTON State: TX Zip: 77227 + 7570 Contact Person: LAURA BETH HICKERT Phone: (620) 629-4253 CONTRACTOR: License # 34660 | | | 2115 Feet from North / South Line of Section 2080 Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE SW County: Seward | | | | |
| | | | | Name: Aztec Well Servicing Co. | | | Lease Name: HITCH A Well #: 6 |
| | | | | Wellsite Geologist: N/A | | <u></u> | Field Name: UNNAMED |
| | | | | Purchaser: N/A | | | Producing Formation: DRY |
| Designate Type of Completion: ✓ New Well Re-Entry Workover | | | Elevation: Ground: 2940 Kelly Bushing: 2951 Total Depth: 6527 Plug Back Total Depth: | | | | |
| ☐ Oil ☐ WSW☐ Gas ☑ D&A☐ OG☐ CM (Coal Bed Methane)☐ Cathodic ☐ Other (Coal Bed Methane)☐ Other (Coal Bed | SWD ENHR GSW | SIOW SIGW Temp. Abd. | Amount of Surface Pipe Set and Cemented at: 1806 Fee Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Fee If Alternate II completion, cement circulated from: | | | | |
| If Workover/Re-entry: Old Well I | | ************************************** | feet depth to:sx cm | | | | |
| Operator: | | | | | | | |
| Well Name: | | | Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) | | | | |
| Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW | | | Chloride content: 2700 ppm Fluid volume: 1000 bbls Dewatering method used: Hauled to Disposal | | | | |
| Plug Back: | Plug | Back Total Depth | Location of fluid disposal if hauled offsite: | | | | |
| Commingled | | | Operator Name: HAYDEN OPERATING | | | | |
| Dual Completion | | H | Lease Name: LIZ SMITH License #: 33562 | | | | |
| SWD ENHR | Permit #: | | Quarter NE Sec. 26 Twp 30 S. R. 34 East Wes County: HASKELL Permit #: D27913 | | | | |
| GSW | | 00/20/2042 | County. | | | | |
| 09/17/2012 09/27/2012 09/29/2012 Stud Date or Date Resolved TD Completion Date or | | Completion Date or | | | | | |
| Spud Date or Date Reached TD Recompletion Date | | 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 |
|----|---|
| 1 | Letter of Confidentiality Received Date: 01/15/2013 |
| | Confidential Release Date: |
| | Geologist Report Received |
| AL | UIC Distribution T I II III Approved by: NAOMI JAMES Date: 01/16/2013 |