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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5447
Name: OXY USA Inc.
Address: P.O. Box 2528
City/State/Zip: Liberal, KS 67905
Purchaser: CIG
Operator Contact Person: Vicki Carder
Phone: (620) 629-4200
Contractor: Name: Key Energy
License: 32393
Wellsite Geologist: NA
Designate Type of Completion:
 New Well Re-Entry X Workover
 Oil SWD SIOW Temp. Abd.
 X Gas ENHR SIGW
 Dry Other (Core, WSW, Expl, Cathodic, etc)
If Workover/Re-entry: Old Well Info as follows:
Operator: OXY USA, Inc.
Well Name: Smith O #1

API No. 15 - 129-00114-0002
County: Morton
C - NW - NW - SE Sec 20 Twp. 33 S. R. 42W
2310 feet from (S) N (circle one) Line of Section
2970 feet from E (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Smith O Well #: 1
Field Name: Greenwood
Producing Formation: Topeka
Elevation: Ground: Kelly Bushing:
Total Depth: 3470 Plug Back Total Depth: 2853
Amount of Surface Pipe Set and Cemented at 333 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set
If Alternate II completion, cement circulated from
feet depth to w/ sx cmt.

Release:
APR 08 2003
From
CONFIDENTIAL
MAR 1 2002
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Original Comp. Date: 01/31/53 Original Total Depth: 3470
 Deepening X Re-perf. Conv. To Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No.
 Dual Completion Docket No.
 Other (SWD or Enhr.?) Docket No.
11/28/01 12/08/01
Date of **START** Date Reached TD Completion Date of **WORKOVER**

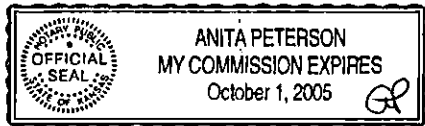
Drilling Fluid Management Plan **REWORK GR 8/20/02**
(Data must be collected from the Reserve Pit)
Chloride content ppm Fluid volume bbls
Dewatering method used
Location of fluid disposal if hauled offsite:
Operator Name:
Lease Name: License No.:
Quarter Sec. Twp. S. R. East West
County: Docket No.:

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 6702, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Vicki Carder
Title: Capital Projects Date March 1, 2002
Subscribed and sworn to before me this 1st day of March
20 02
Notary Public: Anita Peterson
Date Commission Expires: Oct. 1, 2005

KCC Office Use Only
yes Letter of Confidentiality Attached
If Denied, Yes Date:
 / Wireline Log Received
 Geologist Report Received
 UIC Distribution



RECEIVED
MAR - 4 2002
KCC WICHITA

JAN 11 1980

Side Two

Operator Name: OXY USA Inc. Lease Name: Smith O Well #: JATW 117100
Sec. 20 Twp. 33 S. R. 42W - East West County: Morton

Instructions: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
(Attach Additional Sheets)
Samples Sent to Geological Survey Yes No
Cores Taken Yes No
Electric Log Run Yes No
(Submit Copy)
List All E. Logs Run:
**CEMENT BOND
DUAL-SPACED NEUTRON**

Log Formation (Top), Depth and Datum Sample
Name Top Datum

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (in. O.D.)	Weight Lbs./ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Conductor					C		
Surface					C		
Production					C		

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	2681-2685, 2688-2692	1900 Gals 17% HCL Acid	
4	3216'-3222'+3202'-3208'+3154'-3168'+	Frac-14000# 16/30 Ottawa Sand,	
4	3095'-3110'+3069'-3078'+3025'-3046'+	118,100 SCF N2	
4	2967'-2972'+2956'-2963'+2939'-2952'+	2928'-2935'+2906'-2918'+2708'-2718'	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	2840		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	Producing Method
12/10/01	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil BBLS	Gas Mcf	Water Bbbls	Gas-Oil Ratio	Gravity
		1425	39		

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____ Production Interval 2681'-3222' OA