

FORM MUST BE TYPED

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 26100

City/State/Zip Oklahoma City, Ok 73126-0100

Purchaser: Enron

Operator Contact Person: ~~XXXXXX~~ Raymond Hui

Phone (405) 749-2309

Contractor: Name: Cheyenne Drilling Co.

License: 5382

Wellsite Geologist: None

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

1-26-96 1-27-96 2-20-96
Spud Date Date Reached TD Completion Date

API NO. 15-129-21419

County Morton

NE - SW - SW Sec. 19 Twp. 34S Rge. 40 X W

1250 Feet from SW (circle one) Line of Section

1250 Feet from SW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

SW XX, SE, XX or XX (circle one)

Lease Name Murray C Well # 2

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3388' KB 3400'

Total Depth 2720 PBTD 2693'

Amount of Surface Pipe Set and Cemented at _____ 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 ALT 1 87K 12-6-96
(Data must be collected from the Reserve Pit)

Chloride content 1200 ppm Fluid volume 2400 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

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 67202, 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 on 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 Raymond Hui

Title Staff Analyst Date 5-05-96

Subscribed and sworn to before me this 5th day of May, 19 96.

Notary Public KayAnn Gilman

Date Commission Expires 5-2-98

6-10-96

K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
		<input type="checkbox"/> NGPA
		<input type="checkbox"/> Other (Specify)

SIDE TWO

Operator Name AMERICAN OXYGEN USA Inc.

Lease Name Murray C Well # 2

Sec. 19 Twp. 34S Rge. 40 East West

County MORTON

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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:

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Name	Top	Datum
Herington	2401'	1001
Krider	2420	982
Winfield	2470	932
Towanda	2548	854

Ran Dual Spaced Neutron Log

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
Surface	12 1/4"	8 5/8"	28 28	526'	Cl. A	200	3% Ca. Cl.
Production	7 7/8"	5 1/2"	14	2713'	Cl. A	385	2% Ca. Cl.

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
2	Chase 2492-96'; 2474-76'; 2422-28'; 2408-14'.	Acidized w/1800 gal 7 1/2% HCL	2408-2496'
		Frac'd w/55,550gal. Boragel G25	2408-2496'

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8"	2514		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.		Producing Method			
3-05-96		<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 Bbls.	Gas-Oil Ratio	Gravity
		235	35		

Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 2408-2496'
(If vented, submit ACO-18.) Other (Specify) _____



JOB LOG HAL 2013-C

CUSTOMER OXY USA	WELL NO. 7	LEASE MURRAY	JOB TYPE 5 3/4" P	TICKET NO. 920078
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CHART NO.	TIME	RATE (GPN)	VOLUME (GAL)	PUMPS	PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
					TUBING	CRABING	
	2230						60 loc 1/4 drilling
	0215						1/4 TO 1/2 hr
	0245						Start of OP
	0330						cut wire
	0340						Start 5/8 1/2 3 FF
	0425						CSF on box hook up 5 3/4 P.S
	0436						5 circulation
	437						drop off wire
	0500						cut to pit
	0505	6.0	57	✓		60	Start pump section and 3 sec
	0515	5.5	23.5	✓		700	Start pump at 1000 plus 23 cc
							to flow 10 1/2 1901
	0520	0	80.5	✓		0	shut down from plug
	0521	6.0	30.7	✓		100	Start pump
	0523	6.0	34.7			110	10665 drop wire to pit
	0525	2.0	30.7	✓		120	10665 drop wire to pit
	0532						Land plug
	0533						Spud in P.G
	0535						Job over
							Thanks for calling
							Type Danny Mallos
							30 min Job Time
							6 hr 35 min loc Time
							158

410 103

FIELD *Hugoton* SEC *19* TWP *34S* R. *100E* S. *100N*

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD. OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____

PRESENT PROD. OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC DATA _____ TOTAL DEPTH _____

WELLS DATA

NO.	USED	WEIGHT	SIZE	FROM	TO	MAXIMUM FE ALLOWABLE
1		2.9	2.9	10	526	
2						
3						
4						
5						
6						
7						
8						
9						
10						

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
FLAT COLLAR <i>Beilco 6 3/8</i>	<i>1</i>	
FLAT SHOE		
GUIDE SHOE		
CENTRALIZERS <i>5H 6 5/8</i>	<i>3</i>	
BOTTOM PLUG		
TOP PLUG <i>5W 6 3/8</i>	<i>1</i>	
HEAD <i>DC 6 3/8</i>	<i>1</i>	
PACKER		
OTHER <i>BC 6 3/8</i>	<i>1</i>	

JOB DATA

CALLER OUT	LOCATION	JOB STARTED	JOB COMPLETED
<i>DATE</i>	<i>TIME</i>	<i>DATE</i>	<i>DATE</i>
<i>TIME 1:30</i>	<i>TIME 1:30</i>	<i>TIME 6:00</i>	<i>TIME 6:30</i>

PERSONNEL AND SERVICE UNITS

UNIT NO.	TYPE	LOCATION
<i>420042</i>	<i>LIBBY</i>	<i>LIBBY</i>
<i>420043</i>	<i>LIBBY</i>	<i>LIBBY</i>
<i>53556</i>	<i>LIBBY</i>	<i>LIBBY</i>
<i>71910</i>	<i>LIBBY</i>	<i>LIBBY</i>
<i>8115</i>	<i>HYDROLOG</i>	<i>HYDROLOG</i>
<i>15307</i>	<i>LIBBY</i>	<i>LIBBY</i>

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL _____ API _____

DISPL. FLUID _____ DENSITY _____ LB/GAL _____ API _____

PROP. TYPE _____ SIZE _____ LB _____

PROP. TYPE _____ SIZE _____ LB _____

ACID TYPE _____ GAL _____

ACID TYPE _____ GAL _____

ACID TYPE _____ GAL _____

SURFACTANT TYPE _____ GAL _____

NE AGENT TYPE _____ GAL _____

FLUID LOSS ADD. TYPE _____ GAL _____

GELLING AGENT TYPE _____ GAL _____

FRIC RED. AGENT TYPE _____ GAL _____

BREAKER TYPE _____ GAL _____

BLOCKING AGENT TYPE _____ GAL _____

PERFAC BALLS TYPE _____ QTY _____

OTHER _____

OTHER _____

OPERATOR *Hugoton*

COPIES REQUESTED _____

WELL DONE THROUGH _____ CASING ANNULUS TBG/ANN

CUSTOMER REPRESENTATIVE *X*

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIONAL	YIELD CU FT/BK	MIXED LB/GAL
<i>1</i>	<i>100</i>	<i>mid con pt</i>	<i>B</i>	<i>3 2000</i>	<i>11 1/2</i>	<i>3.22</i>	<i>11.1</i>
<i>2</i>	<i>100</i>	<i>prop pt</i>	<i>B</i>	<i>2 2000</i>	<i>11 1/2</i>	<i>1.97</i>	<i>14.5</i>

PRESSURES IN PSI

CIRCULATING _____ DISPLACEMENT _____

BREAKDOWN _____ MAXIMUM _____

AVERAGE _____ FRACTURE GRADIENT _____

SHUT-IN INSTANT _____ 5 MIN _____ 15 MIN _____

HYDRAULIC HORSEPOWER _____

ORDERED _____ AVAILABLE _____ USED _____

AVERAGE RATES IN BPM _____

TREATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET *43* REASON *stop joint*

SUMMARY

VOLUMES

PRESSURE BEL GAL _____ TYPE _____

LOAD & BKDN BEL GAL _____ PAD BEL GAL _____

TREATMENT BEL GAL _____ DISPL. BEL GAL *30*

CEMENT SLURRY BEL GAL *37 1/2*

TOTAL VOLUME BEL GAL _____

REMARKS *20.7 BBL CMT RETURNS*