

ORIGINAL

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

Operator: License # 5447

Name: OKY USA, Inc.

Address P.O. Box 2528

City/State/Zip Liberal, KS 67855

Purchaser: DUKE

Operator Contact Person: KENNY L. ANDREWS

Phone (316) 629-4232

Contractor: Name: BORDERLINE (COMPLETION)

License: _____

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: OKY USA, Inc.

Well Name: WINTER A-92

Comp. Date 11/11/99 Old Total Depth 6800'

Deepening Re-perf. Conv. to Inj/SWD

Plug Back 6390 PSTD

Coamingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

WO 11/1/99 11/02/99 11/11/99

Start Speed Date Date Reached TD Completion Date

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 Kenny Andrews
Title ENGINEERING TECHNICIAN Date 2-1-00

Subscribed and sworn to before me this 1st day of February, 2000

Notary Public Anita Peterson
Date Commission Expires Oct. 1, 2001

NOTARY PUBLIC, State of Kansas
ANITA PETERSON
My Appt. Exp. Oct. 1, 2001

API NO. 189-21195-0001
County STEVENS
NW - NW - NE Sec. 26 Twp. 34S Rge. 15W
330 Feet from the North Line of the Section
2310 Feet from the East Line of the Section
Footages Calculated from Nearest Outside Section Corner:
 SE, NW or SW (circle one)
Lease Name WINTER A Well # 2
Field Name KANSAS HOGOTON
Producing Formation CHASE
Elevation: Ground 2964 KB 2975
Total Depth 6800 PSTD 6390
Amount of Surface Pipe Set and Cemented at 1671' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 3309 Feet
If Alternate II completion, cement circulated from _____ feet depth to _____ w/ _____ sx cat.
Drilling Fluid Management Plan Re-work, 3-27-00
(Data must be collected from the Reserve Pit)
Chloride content NA ppm Fluid volume NA bbls
Dewatering method used NA
Location of fluid disposal if hauled offsite: NA
Operator Name NA
Lease Name NA License No. NA
Quarter S Sec. S Twp. S Rng. W
County _____ Docket No. _____

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

X

Operator Name OXY USA, Inc.

Lease Name WINTER Well # 2

Age 35M

County STEVENS

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 Take Yes No
(Attach Additional Sheets.)

Log Formation (Top), Depth and Datum Sample

Samples Sent to Geological Survey Yes No

Name	Top	Datum
CIMARRON ANHY	0	1672
SHALE	1672	1850
LIME	1850	6800

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

TD	6800
PBTD	6738

List All B.Logs Run:
BHC SONIC/GR & CAL CBL W/ GR & CCL
PET W/ GR & CCL

CASING RECORD New 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"	24	1671	C	625	6% GEL, 2% CACL2
Intermediate					C		
Production	7-7/8"	5-1/2"	15.5	6799	C	860	6% GEL, 12% CACL2
			14.0		C	660	2% GEL, 2% CACL2

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top - Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate				
Protect Casing	-			
Plug Back TD	-			
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
	10,008 CIBP SST AT 6390' W/ 2 SX CMT		6390'
2	2719'-22, 2690'-94, 2656'-70	1500 GALS 15%, 17,924 GALS GEL	

TUBING RECORD Size 7-7/8" Set At 2820 Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 12/19/99 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	136	12	NA	

Disposition of Gas: _____ METHOD OF COMPLETION _____ Production Interval 2656-2722

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