

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

API NO. 15-189-220800001 **ORIGINAL**

County Stevens

C - S/2 - S/2 - SE/4 Sec. 14 Twp. 34S Rge. 35 ^E/_W

330 FSL Feet from XXX (circle one) Line of Section

1320 FEL Feet from XXX (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
XX, SP, XX or XX (circle one)

Lease Name Clodfelter A Well # 3

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 2985' KB 2996'

Total Depth 6865' PBDT 3068'

Amount of Surface Pipe Set and Cemented at 1521 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 REWORK JH 9-9-97
(Data must be collected from the Reserve Pit)

Chloride content 3200 ppm Fluid volume 1800 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. _____

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 300

City/State/Zip Tulsa, ok 74102-0300

Purchaser: PE

Operator Contact Person: Raymond Hui

Phone (918) 561-3548

Contractor: Name: Cheyenne Drilling Co.

License: 5382'

Wellsite Geologist: None on site

Designate Type of Completion
 New Well Re-Entry Workover.

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

If Workover:
Operator: OXY USA Inc.

Well Name: Clodfelter A 3

Comp. Date was TA'd Old Total Depth 6865'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 3068' PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

6-14-96 6-14-96 10-17-96
~~Date~~ Date OF START Date Reached TD Completion Date OF
OF WORKOVER WORKOVER

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 10-25-96

Subscribed and sworn to before me this 25th day of October, 19 96.

Notary Public Karen Anne Wells

Date Commission Expires 9-22-97

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)

RECEIVED
KANSAS CORP COM
FEB 14 1997
Form ACO-1
88

Operator Name OXY USA, Inc.

Lease Name Clodfelter A

Well # 3

Sec. 14 Twp. 34S Rge. 35
 East
 West

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 Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Chase	2680	2756
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				

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"	24	1521'	CL A	450	3%
Production	7 7/8"	5 1/2"	14	3088'	CL A	400	2%

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)	
		Amount	Depth
1	2680-86'; 2706-10'; 2750-56'	Acidized w/1500 gal 7 1/2%	
		HCL Frac'd w/33,000 gal	
		Deta-15	

TUBING RECORD		Size <u>2 3/8"</u>	Set At <u>2783'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>10-17-96</u>			Producing Method <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 <u>0</u> Bbls.	Gas <u>198</u> Mcf	Water Bbls.	Gas-Oil Ratio <u>0.005</u>	Gravity

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: 2680'-2686'
2706'-2710'
2750'-2756'



CHARGE TO
 ADDRESS
 CITY STATE ZIP CODE

TICKET No. 920344-7
 RECEIVED KANSAS CORP COMM
 PAGE 1 of 2

WELL LOCATIONS: LIBERAL KANS, HUGOTON KANS
 WEL/PROJECT NO: A-3
 LEASE: CLODFELTER
 COUNTY/PARISH: STEVENS
 STATE: KANSAS
 CITY/OFFSHORE LOCATION: LAND
 DATE: 6-14-96
 OWNER:
 TICKET TYPE: SERVICE JOB? YES NO
 SALES NO
 CONTRACTOR:
 RIG NAME/NO: CHEYENNE #2
 SHIPPED: YES NO
 DELIVERED TO: LOCATION
 ORDER NO:
 WELL TYPE: 02
 WELL CATEGORY: 01
 JOB PURPOSE: 035
 WELL PERMIT NO:
 WELL LOCATION:
 INVOICE INSTRUCTIONS: CEMENT 5 1/2 PLUG BACK LONG STRING

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT	
		LOC	ACCT	DF		UM	UM	PRICE			
00-117				40	MILEAGE R.C.M	34	MI	1	EA	285	96.90
00-119					CREW MILEAGE	34	MI	1	EA	150	51.00
01-016					DEPTH CHARGE	3098	FT	1	EA	15.00	1500.00
09-308					PLUG BACK CHARGE	3250	FT	1	EA	1070.00	1070.00
20-016				40	TOP PLUG	1	EA	1	EA	60.00	60.00
12A	825.205			32	GUIDE SHOE	1	EA	1	EA	121.00	121.00
24A	815.19251				INSERT FLOAT	1	EA	1	EA	110.00	110.00
27	815.19311				FILL-UP ASSY.	1	EA	1	EA	69.00	69.00
40	806.60028				CENTRALIZERS (S-4)	10	EA	1	EA	60.00	600.00
320	806.71436				BASKET	1	EA	1	EA	104.00	104.00
350	890.10802			32	WELD-A	1	LB	1	EA	16.175	16.175

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO PART OF WORK OR DELIVERY OF GOODS

SUB SURFACE SAFETY VALVE WAS
 PULLED & RETURN PULLED RUN

TYPE LOCK DEPTH
 BEAN SIZE SPACERS
 TYPE OF EQUALIZING SUB. CASING PRESSURE
 TUBING SIZE TUBING PRESSURE WELL DEPTH
 TREE CONNECTION TYPE VALVE

SURVEY
 OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?
 WE UNDERSTOOD AND MET YOUR NEEDS?
 OUR SERVICE WAS PERFORMED WITHOUT DELAY?
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?
 ARE YOU SATISFIED WITH OUR SERVICE?
 YES NO
 CUSTOMER DID NOT WISH TO RESPOND

AGREE UN-DECIDED DIS-AGREE

PAGE TOTAL: 3798.65
 FROM CONTINUATION PAGE(S): 9349.80
 SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE: 113148.51
 7970.17

ORIGINAL

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES. The customer hereby acknowledges receipt of the materials and services listed on this ticket.

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT):
 CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE):
 HALLIBURTON OPERATOR/ENGINEER: Megan A. Wilson
 EMP #: 62275
 HALLIBURTON APPROVAL: [Signature]

P.02
 11:26A
 1905 K
 09-04-97
 316 624 3478
 316 624 3478
 FAX NO.:
 316 624 3478
 LIBERAL
 FROM:

PAGE.02
 316 624 3478
 SEP 04 '97 11:30

Jim: 019: bloodfelter A #3

1) cont tickets for surface eq.

2) I'm told that there is no
other loops, ^{run} other than we ones
we have submitted.

Thanks

Raymond Hair

08.07.17



HALLIBURTON

TICKET CONTINUATION

ORIGINAL

TICKET No. 920344

HALLIBURTON ENERGY SERVICES

CUSTOMER Oxy USA	WELL Clodfelter A3	DATE 6-13-96	PAGE 2	OF 2
---------------------	-----------------------	-----------------	-----------	---------

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE	AMOUNT
		LOC	ACCT	DF		U/M	U/M		
504043	516.00272			49	Premium Cmt.	50	sk	11.08	554.00
504282					Midcon Cmt.	400	sk	16.76	6704.00
504050	516.00265					400	sk		
507285	70.15250-					752	lb		
508127	516.00335					81	sk		
507120	890.50071				Flo 1/2"-400sk	100	lb	1.65	165.00
509406	890.50812				Calcium Chloride 2%-400sk	8	sk	36.75	294.00
507395	890.50077				HR-5 1/10%-50sk	5	lb	2.90	14.50
307-913					MF-1	100	lb	1.70	170.00
318-107					MORFLO II	5	gal	26.50	132.50
313-316					BE-6	1	lb	70.00	70.00
314-163					CLA-Fix II	3	gal	28.00	84.00
318-525					SSO-21M	3	gal	24.50	73.50
500207					SERVICE CHARGE			1.35	665.55
500306					MILEAGE CHARGE			.95	422.81
					TOTAL WEIGHT	44,506			
					LOADED MILES	20			
					TON MILES	445.06			
					CUBIC FEET	493			

ORIGINAL

CONTINUATION TOTAL 9349.86

No. B 341897

FROM: HALLIBURTON LIBERAL FAX NO. 316 624 3478

SEP 04 '97 11:30 316 624 3478 PAGE.03

WELL DATA

FIELD _____ SEC 14 TWP 34S RNG 35W COUNTY STEVENS STATE KANSAS

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 _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	N	14	3 1/4	0	3099	
LINER						
TUBING	U		4 1/2 IN	0	3250	PLUG BACK
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>6-13-96</u> TIME <u>2:30</u>	DATE <u>6-14-96</u> TIME <u>0:30</u>	DATE <u>6-14-96</u> TIME <u>0:20</u>	DATE <u>6-14-96</u> TIME <u>1:20</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>MERV ALLISON</u>	<u>38242</u>	<u>DUNCAN</u>
<u>62275</u>	<u>94</u>	<u>OKLA</u>
<u>JOHN KURT</u>	<u>5270-7131</u>	<u>DUNCAN</u>
<u>85257</u>	<u>R.C.M.</u>	<u>OKLA</u>
<u>DENNIS CORPINE</u>	<u>4157-0612</u>	<u>HUGOTON</u>
<u>H-2441</u>	<u>BULL</u>	<u>KS</u>
<u>DANIEL CORPINE</u>	<u>50366-7137</u>	<u>HUGOTON</u>
<u>62728</u>	<u>BULL</u>	<u>KS</u>

DEPARTMENT CEMENT BOND
 DESCRIPTION OF JOB PLUG BACK LINING

JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN

CUSTOMER REPRESENTATIVE X *[Signature]*

HALLIBURTON OPERATOR MERV ALLISON COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF BAGS	CEMENT	BRAND	BULK CEMENT	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
<u>1</u>	<u>50</u>	<u>H</u>		<u>B</u>	<u>1/2 HR-S</u>	<u>1.18</u>	<u>15.6</u>
<u>2</u>	<u>300</u>	<u>ATTACON C</u>		<u>B</u>	<u>2% C.C. - 1/4 1/2 FLOCCEL</u>	<u>2.22</u>	<u>11.1</u>
<u>3</u>	<u>100</u>	<u>MIDCON C</u>		<u>B</u>	<u>2% C.C. - 1/4 1/2 FLOCCEL</u>	<u>1.84</u>	<u>13.2</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRES. LOSS: BBL. 10 TYPE MUD LOSS
 BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL. GAL. _____ PAD: BBL. GAL. _____
 AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL. GAL. _____ DISPL. BBL. 74.5
 SHUT-IN: INSTANT _____ 5-MIN. _____ 15-MIN. _____ CEMENT SLURRY: BBL. (1) 72 (6) 32.71
 ORDERED _____ AVAILABLE _____ USED _____ TOTAL VOLUME: BBL. 74.48
 TREATING _____ DISPL. _____ OVERALL _____ REMARKS
 CEMENT LEFT IN PIPE _____
 FEET 21 REASON SIDE JOINT
 SEE JOBS LOG

FIELD OFFICE

JOB LOG HAL-2013-C

6-14-96 1

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
OAT USA INC		A-3		CLOUDFILTER		5 1/2 RINGBACK LONGSTRENGTH		920344	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	2330							CALL OUT	
	0130							ON LOCATION	
	0145							SAFETY MEETING	
	0620							HOOK TO DRILL PIPE	
	0627	2	10				167	H ₂ O AHEAD	
	0632	2	10.5				94	MIX 500 ^{SS} H" 15 ^{SS} / BBL - 1.18 ^{SS} / G - 5.2 ^{SS} / G	
	0637	2.5	3.5				88	H ₂ O BEHIND	
	0639	6	36				83	DISPLACE W/ MUD	
								LONGSTRENGTH:	
	1405	2	6					PULL RAT AND MOUSE HOLE	
	1336							CIRCULATE W/ REG PUMP	
	1416	5.5	10				231	PUMP MUD FLUSH	
	1418	1	2				230	H ₂ O AHEAD	
	1421	5.8	166				270	MIX 300 ^{SS} MED W/ C" W/ 2% P.C. - 1/4" / G FLUCCIE 11.1 ^{SS} / G - 3.77 ^{SS} / G - 20.17 ^{SS} / G	
	1447	5.8	32.7				190	MIX 100 ^{SS} MED W/ C" W/ 2% P.C. - 1/4" / G FLUCCIE 13.2 ^{SS} / G - 1.94 ^{SS} / G - 9.97 ^{SS} / G	
	1452							DROP PLUG	
	1453							WASH PUMP; LINES	
	1455	5	74.5				89	DISPLACE CEMENT W/ BE-6 - CLAY PASTE - SSDZIM	
	1517						1312	BUMP PLUG	
							✓	CHECK FLOAT	
								0 SACKS TO BIT	
								1.25 BPM RATE BEFORE PLUG BUMPED!	
								849 PSI PRESSURE BEFORE PLUG BUMPED!	

ORIGINAL

THANK YOU
MERRY AND TOMMY

FIELD OFFICE