

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

API NO. 15-189-22074-0000 ORIGINAL
County Stevens
- NE - NE- NE Sec. 7 Twp. 34S Rge. 35 E/W

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 300

City/State/Zip Tulsa, OK 74102-0300

Purchaser: PEPL

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 SIOW Temp. Abd.

Gas ENHR SIGM

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. _____

6-16-96 6-18-96 7-15-96

Spud Date 6-16-96 Date Reached TD 6-18-96 Completion Date 7-15-96

4680 FSL Feet from SW (circle one) Line of Section

660 FEL Feet from SW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SW, NW or SW (circle one)

Lease Name Mills C Well # 3

Field Name Hugoton

Producing Formation Chase

Elevations: Ground 3011' KB 3022

Total Depth 2953' PBTD 2911'

Amount of Surface Pipe Set and Cemented at 725 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 JK 5-15-97
(Data must be collected from the Reserve Pit)

Chloride content 1800 ppm Fluid volume 2500 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, 200 Colorado Derby Building, 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 Analyst Date 8-20-96

Subscribed and sworn to before me this 20th day of August, 1996.

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)

Operator Name OXY USA Inc. Lease Name Mills C Well # 3
 Sec: 7 Twp. 34S Rge. 35 East County Stevens
 West

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: Run cased hole log.

Log Formation (Top), Depth and Datums Sample

Name	Top	Datum
Hollenberg	2656	368
Herington	2674	350
Krider	2711	313
Winfield	2760	264
Towanda	2815	209

CASING RECORD <input 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	725	CL A	280	2% cc
Production	7 7/8"	5 1/2"	14	2921	CL A	500	2% cc

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 ID				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
2	2662-66; 2682-88; 2612-14;		Acidized w/1600 gal 7 1/2 HCL	
	2634-38		Frac'd w/40147 gal 15#	
			Delta gel.	

TUBING RECORD		Size	Set At	Packer At	Liner Run			
		2 3/8"	2733'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumed Production, SWD or Inj. Pump Testing		7-15-96		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	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
			210					

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: 2634'-38'
2612'-2614'
2662'-2666'
2682'-2688'

WELL DATA

FIELD _____ SEC. *7* TWP. *34* RING. *25* COUNTY *ST. LOUIS* STATE *MO*

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			<i>8 1/2</i>	<i>KB</i>	<i>725</i>	
LINER						
TUBING						
OPEN HOLE			<i>13 1/2</i>	<i>CL</i>	<i>750</i>	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						<i>ORIGINAL</i>
PERFORATIONS						

JOB DATA

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <i>6-15</i>	DATE <i>6-16</i>	DATE <i>6-16</i>	DATE <i>6-16</i>
TIME <i>3:45</i>	TIME <i>7:45</i>	TIME <i>8:00</i>	TIME <i>2:45</i>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR: <i>Round Plug</i>	<i>1</i>	
FLOAT SHOE	<i>1</i>	
GUIDE SHOE		
CENTRALIZERS	<i>3</i>	
BOTTOM PLUG		
TOP PLUG	<i>1</i>	
HEAD		
PACKER <i>B.V.T.</i>	<i>1</i>	
OTHER		

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<i>D. [unclear]</i>	<i>420041</i>	<i>Louisville Mo</i>
<i>D. [unclear]</i>	<i>52734</i>	<i>"</i>
<i>D. [unclear]</i>		<i>"</i>
<i>[unclear]</i>	<i>5194</i>	<i>Missouri</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. _____ IN

NE AGENT TYPE _____ GAL. _____ IN

FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN

GELLING AGENT TYPE _____ GAL.-LB. _____ IN

FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN

BREAKER TYPE _____ GAL.-LB. _____ IN

BLOCKING AGENT TYPE _____ GAL.-LB. _____

PERFPAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

DEPARTMENT: *Cement*

DESCRIPTION OF JOB: *3rd Cement*

JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE: *[Signature]*

HALLIBURTON OPERATOR: *[Signature]* COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<i>150</i>	<i>Mack Co</i>	<i>Sh. Pl.</i>		<i>3/16" 1/2" 1/4" Lead</i>	<i>3.20</i>	<i>11.1</i>
	<i>100</i>	<i>[unclear]</i>			<i>2/16" 1/2" 1/4" L</i>	<i>1.32</i>	<i>14.2</i>

PRESSURES IN PSI SUMMARY VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRES LUSH: BBL.-GAL. _____ TYPE _____

BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL.: BBL.-GAL. _____

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN. _____ KANSAS CORPORATION COMMISSION _____

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

ORDERED _____ AVAILABLE _____ USED _____ REMARKS _____

AVERAGE RATES IN BPM _____ *SEP 03 1996*

TREATING _____ DISPL. _____ OVERALL _____ CEMENT LEFT IN PIPE _____

FEET *71.91* REASON *Show Log* _____ CONSERVATION DIVISION WICHITA, KS

CUSTOMER _____ LEASE _____ WELL NO. _____ JOB TYPE _____ DATE *6-15-96*

