STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION	API NO. 15- 189-21160-0001
RECOMPLETION FORM .	county Stevens
ACO-2 AMENDHENT TO WELL HISTORY	SW/4 NE/4 NE/4 sec. 30 Twp. 34S Rge. 35 X West
Operator: License # 5447	4030 Ft. North from Southeast Corner of Section
Name: OXY USA, Inc.	Ft. West from Southeast Corner of Section
Address: P.O. BOX 26100	(Formerly Stalcup G #1) section plat below.)
city/State/Zip: OKLA. CITY, OK 73126-0100	Lease Name _Stalcup B well # 2
Purchaser: Panhandle Eastern	Field Name Walkmeyer
}	Producing Formation Morrow
Operator Contact Person: Raymond Hui Phone:(405 ) 749-2471	Elevation: Ground 3020' KB 3031'
Designate Type of Original CompletionX New Well Re-Entry Workover	REWORK 4950 4950 4620
Date of Original Completion 4-29-1988	10/3/00 X 4290 3960
Name of Original Operator OXY USA, Inc.  Original Well Name Stalcup G #1  STATE CORPORATION	ED 3630 3300
ntiginal well wame - Scalenba a 47	1
vace of Recompletion.	1 1980 M
3-9-1990 4-24-1990 MAI  Commenced Completed copy	TION DIVISION 1650
Commenced Completed CONSERV	18. Kansas 990 660 330
Designate Type of Recompletion/Workover:  Oil SWD Temp. Abd.  X Gas Inj Delayed Comp.  Other (Core, Water Supply, etc.)  Deepening XXX Re-perforation  X Plug Back 6400' PBTD  Conversion to Injection/Disposal  X RENUMBERED WELL  Is recompleted production:  Commingled Docket No.  Dual Completion Docket No.  Other (Disposal or Injection?)  Docket No.  INSTRUCTIONS: This form shall be completed in triplicate at Derby Building, Wichita, Kansas 67202, within 120 days apply. Information on side two of this form will be held of and submitted with the form. See rule 82-3-107 for confider wireline logs and driller's time logs (not previously submit	of the recompletion, of any well. Rules 82-3-107 and 82-3-141 onfidential for a period of 12 months if requested in writing attaility in excess of 12 months. One copy of any additional
prior to or with this form for approval of commingling or do CP-111 with all temporarily abandoned wells. NOTE: Convergence of the convergence of	cted) shall be attached with this form. Submit ACO-4 or ACO-5 ual completions. Submit CP-1 with all plugged wells. Submit cersion of wells to either disposal or injection must receive a submit receive a submit cersion of wells to either disposal or injection must receive a submit cersion of wells to either disposal or injection must receive a submit cersion of wells to either disposal or injection must receive a submit cersion of wells to either disposal or injection must receive a submit cersion of wells to either disposal or injection must receive a submit acoustic cersion of wells.
Ath and the statements herein are complete and correct to the	soperations Drilling Managerate 5-9-90
subscribed and sworn to before me this 9th day of	
Jotary Public Standard Day Ma	Date Commission Expires 3/24/94
<i>u</i> '	/ (

FORM ACO-2 7/89 SIDE TWO

Operator NameOXY	USA, Inc.	Lease Name	Stalcup B	Well # 2
sec. <u>30</u> twp. <u>345</u>	Rge. 35 X West	. County <u>S</u>	tevens	
		RECOMPLETION FORMATION DE	SCRIPTION	
		X Log Sam	mple	
<u>Name</u>			Тор	Bottom
Morrow		•	6257	6267'
, TD PBTD	!			6880' 6400'
,		, ,		
	•	ı		
	,		<del>d</del>	
	ADDI	TIONAL CEMENTING/SQUEEZE	RECORD	
Purpose:	Depth Top Battom Type of	Cement # Sacks Used	Type and	Percent Additives
Perforate Protect Casing X Plug Back TD	6257 6267 (Set	Baker Model S CIB	P'at 6420 <b>';</b> dump	oed 2 sx Cl.H cmt on Cl
Plug Off Zone				
,			<del></del>	
Shots Per Foot	PERFORATI Specify Footage of Each I		Acid, Fracture,	Shot, Cement Squeeze Record Kind of Material Used)
4	Specify Footage of Each Interval Perforated  Morrow 6257-6267		Acidized w/3300 gal. 70 0 foamed	
	(10'; 40 shots)		15% HCL acid.	
			<del></del>	<del> </del>
вто <u>6400°</u>	Plug Type _	CIBP		·
0 0/011	6267!	TUBING RECORD		, , , ,
	Set AtSet At		Was L	iner Run Y
stimated Production	Per 24 Hours Oil -	' Rbls. Water	Bbls.	Gas-Oil-Ratio
ignorition of Cos-	CAC Gas 110	)F )O Mcf		
isposition of Gas:	Used on Lease (If	Nontral orderic top 40		