

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

API NO. 15 189-21598 0001 **ORIGINAL**
County Stevens
_____ C _____ NE _____ NE Sec. 28 Twp. 34S Rge. 35 _____ E
_____ X _____ W

Operator: License # 5447

4620 Feet from SN (circle one) Line of Section

Name: OXY USA Inc.

660 Feet from EW (circle one) Line of Section

Address P. O. Box 26100

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

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

Lease Name Wonder C Well # 2

Purchaser: Panhandle Eastern Pipeline

Field Name Hugoton

Operator Contact Person: Jerry Ledlow

Producing Formation Chase

Phone (405) 749-2309

Elevation: Ground 2983 KB 2994

Contractor: Name: Beredco

Total Depth 6850 PBSD 2950

License: 5147

Amount of Surface Pipe Set and Cemented at 1784 Feet

Wellsite Geologist: None

Multiple Stage Cementing Collar Used? Yes X No

Designate Type of Completion

If yes, show depth set _____ Feet

_____ New Well _____ Re-Entry X Workover

If Alternate II completion, cement circulated from _____

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

feet depth to _____ w/ _____ sx cmt.

If Workover:

Drilling Fluid Management Plan REWORK 97 9-6-95
(Data must be collected from the Reserve Pit)

Operator: OXY USA Inc

Chloride content 500 ppm Fluid volume 5000 bbls

Well Name: Wonder C #2

Dewatering method used Evaporation

KCC 97 WAS TA'D
Comp. Date 2/4/94 Old Total Depth 6850

Location of fluid disposal if hauled offsite:

_____ Deepening X Re-perf. _____ Conv. to Inj/SWD
X Plug Back _____ 2950 _____ PBSD
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Inj?) _____ Docket No. _____

Operator Name _____

Lease Name _____ License No. _____

WO 9/27/94 _____ 1/14/95
Date OF START OF WORKOVER Date Reached TD Completion Date OF WORKOVER

_____ 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 [Signature]
Title Staff Analyst Date 1/18/95

Subscribed and sworn to before me this 18th day of January, 1995.

Notary Public [Signature]

Date Commission Expires 8-21-96

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C X Wireline Log Received
C _____ Geologist Report Received
Distribution: X KCC _____ SWD/Rep _____
_____ KGS _____ Plug _____
_____ Other (Specify) _____
RECEIVED STATE CORPORATION COMMISSION
JAN 19 1995
OPERATION DIVISION KANSAS

SIDE TWO

Operator Name OXY USA, Inc. Lease Name Wonder C Well # 2
JANUARY East County Stevens
 Sec. 28 Twp. 34S Rge. 35 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table border="0"> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Heebner</td> <td>4306</td> <td>- 1312</td> </tr> <tr> <td>Toronto</td> <td>4326</td> <td>- 1332</td> </tr> <tr> <td>Lansing</td> <td>4426</td> <td>- 1432</td> </tr> <tr> <td>Marmaton</td> <td>5278</td> <td>- 2284</td> </tr> <tr> <td>Morrow</td> <td>5872</td> <td>- 2878</td> </tr> <tr> <td>Chester</td> <td>6222</td> <td>- 3228</td> </tr> <tr> <td>Ste. Genevieve</td> <td>6532</td> <td>- 3538</td> </tr> <tr> <td>St Louis</td> <td>6618</td> <td>- 3624</td> </tr> </table>	Name	Top	Datum	Heebner	4306	- 1312	Toronto	4326	- 1332	Lansing	4426	- 1432	Marmaton	5278	- 2284	Morrow	5872	- 2878	Chester	6222	- 3228	Ste. Genevieve	6532	- 3538	St Louis	6618	- 3624
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Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																												
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																												
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																												
List All E.Logs Run: Z-Densilog Compensated Neutron Dual Induction Focused Log Minilog BHC Acoustilog Cement Bond 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"	24	1784	C	650	6%gel, 2% cacl
Production	7 7/8"	5 1/2"	14	3000	C	510	6%gel, 2% cacl

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
4	2776-2780	Acidized w/1000 gal 15% FE	2776-2780
2	2724-30, 2693-98, 2671-74, 2663-65	Acidized w/2000 gal 15% FE	2663-2730
		Frac w/27,800 gal gel % 89,900 #	
		10/20 sand	

TUBING RECORD	Size <u>2 3/8</u>	Set At <u>2573</u>	Packer At <u>2593</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>1/14/95</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 Bbls.	Gas 200 Mcf	Water 26 Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas: **METHOD OF COMPLETION** Production Interval 2663-2665
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, submit ACO-18.) Other (Specify) _____