

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

Operator: License # 5447
Name: OXY USA, Inc.
Address P.O. Box 2528
1701 N. KANSAS
City/State/Zip Liberal, KS 67905

Purchaser: CIG

Operator Contact Person: Kenny Andrews

Phone (316) 629-4232

Contractor: Name: N/A

License: N/A

Wellsite Geologist: N/A

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: OXY USA, Inc.

Well Name: WEATHERFORD A # 1

Comp. Date 9/1/53 Old Total Depth 3295

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

5/24/00 7/21/00 7/21/00
Spud 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 9/25/00
Subscribed and sworn to before me this 25th day of Sept. 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. 15-129-10341-0001 ORIGINAL
County MORTON
C - NE-NW-NW Sec. 18 Twp. 33S Rge. 42W
4950 Feet from the South Line of the Section
2310 Feet from the West Line of the Section

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

Lease Name WEATHERFORD A # 1 KCC

Field Name GREENWOOD SEP 25 2000

Producing Formation TOPEKA

Elevation: Ground _____ KB CONFIDENTIAL

Total Depth 3295 PBTD 3261

Amount of Surface Pipe Set and Cemented at 600 Feet

Mud 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 OWWO 3-18-02
(Data must be collected from the Reserve Pit) BPW

Chloride content N/A ppm Fluid volume NA bbls

Dewatering method used NA

Location of fluid disposal if hauled offsite:

NA

Operator Name NA

License No. NA

Quarter 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)

Operator Name LOXY USA, Inc.

Lease Name WEATHERFORD A Well # 1

Sec. 18 Twp. 33S Rge. 42W

County MORTON

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 Datums Sample

Samples Sent to Geological Survey Yes No

Name Top Datum

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:

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		8-5/8		600	C	300	
Intermediate					C		
Production		5-1/2	14	3294	C	450	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top - Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate			4000	
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
	3252-58, 3240-44, 3212-30, 3184-3200, 3046-68,		
	3035-39, 2975-79, 2964-70, 2944-54, 2930-33,		
	2906-20		
4	2704-10		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8"	3237		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. 7/21/00 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	453	0	N/A	N/A

Disposition of Gas: Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

METHOD OF COMPLETION Production Interval 2704-3258

(If vented, submit ACO-18.)