

ORIGINAL

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
ACO-2 AMENDMENT TO WELL HISTORY

Operator: License # 5447Name: OXY USA, Inc.Address: P.O. BOX 26100City/State/Zip: OKLA. CITY, OK 73126-0100Purchaser:
Northern Natural PipelineOperator Contact Person: Raymond Hui
Phone: (405) 749-2471Designate Type of Original Completion
☐ New Well ☐ Re-Entry ☒ WorkoverDate of Original Completion 2/5/88Name of Original Operator OXY USA INC.Original Well Name Graham B #2

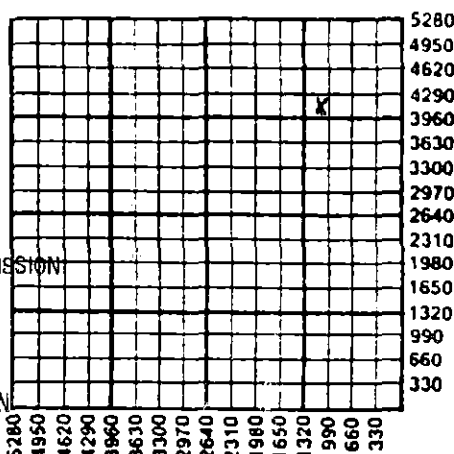
Date of Recompletion:

1/9/91 8/13/91Commenced CompletedRe-entry ☐ Workover ☒Designate Type of Recompletion/Workover:
☒ Oil ☐ SWD ☐ Temp. Abd.
☒ Gas ☐ Inj ☐ Delayed Comp.
☐ Dry ☐ Other (Core, Water Supply, etc.)☒ Deepening ☐ Re-perforation
☐ Plug Back ☐ PBD
☐ Conversion to Injection/Disposal

Is recompleted production:

☐ Commingled Docket No. _____
☒ Dual Completion Docket No. _____
☐ Other (Disposal or Injection?) Docket No. PendingAPI NO. 15- 175-20989-R 00-01County SewardApprox. SW NE NE/4 Sec. 4 Twp. 34S Rge. 33 ☒ East
West4030 Ft. North from Southeast Corner of Section1100 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name Graham B Well # 2Field Name Kansas Hugoton Gas.Producing Formation ChaseElevation: Ground 2847' KB 2858'

RECEIVED

STATE CORPORATION COMMISSION

AUG 19 1991

OIL & GAS CONSERVATION DIVISION
Wichita, Kansas

K.C.C. OFFICE USE ONLY

F ☐ Letter of Confidentiality Attached
C ☐ Wireline Log Received
C ☐ Drillers Timelog ReceivedDistribution
☒ KCC ☐ SWD/Rep ☐ NGPA
☐ KGS ☐ Plug ☐ Other
(Specify)

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

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 Vic Tumlinson Title Operations Drilling Manager Date _____Subscribed and sworn to before me this 13th day of August 19 91Notary Public Kay Ann Kilmer Date Commission Expires 4-16-94

FORM ACO-2

7/89

p1

SIDE TWO

Operator Name OXY USA, Inc. Lease Name Graham B Well # 2
 Sec. 4 Twp. 34S Rge. 33 ☐ East
☒ West County Seward

RECOMPLETION FORMATION DESCRIPTION

☐ Log ☐ Sample

Name	Top	Bottom
Herington	2649'	2657'
Krider	2680'	2687'
TD		6508'
PBTD		2740'

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<input checked="" type="checkbox"/> Perforate					
<input type="checkbox"/> Protect Casing					
<input checked="" type="checkbox"/> Plug Back TD			Set CIBP @ 6160'	Set CIBP @ 2740'	
<input type="checkbox"/> Plug Off Zone					

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)
2	2649-2657 (8'; 1b shots)	Acidized Chase w/4000 gal of 7½% HCL/HNP-1 acid. Frac/d w/ 32600 gal 30# HPG-LCC XL'd gel and 88,100 # 12/20 Brady sand.
	2680-2687 (7'; 14 shots)	

PBTD 2740' Plug Type CIBP

TUBING RECORD

Size 2 3/8" Set At 2687' Packer At _____ Was Liner Run X Y _____ N _____

Date of Resumed Production, Disposal or Injection waiting for PL connection

Estimated Production Per 24 Hours Oil _____ Bbls. Water _____ Bbls. Gas-Oil-Ratio _____

Gas 350 Mcf

Disposition of Gas:

☐ Vented ☒ Sold ☐ Used on Lease (If vented, submit ACO-18.)