STATE CORPORATION COMMISSION OF KANSAS

| API NO. _129-21223__00-00

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OIL & GAS CONSERVATION DIVISION; WELL COMPLETION FORM ACO-1 WELL HISTORY	CountyMorton
DESCRIPTION OF WELL AND LEASE	
Operator: License #5447	990 Feet from S/X (circle one) Line of Section
Name:OXY USA Inc/	330 Feet from E/X (circle one) Line of Section
AddressP. 0. Box 26100	Footages Calculated from Nearest Outside Section Corner: XX, SE, XX or XX (circle one)
City/State/Zip Oklahoma City, Ok 73126-0100	Lease NameGreenwood C Well #2 Field NameBoehm
Purchaser:	Producing FormationMorrow L-2
Operator Contact Person:Jerry Ledlow	Elevation: Ground3488 KB3499
Phone (_405_)749-2309	Total Depth 4625 PBTD
Contractor: Name:Cheyenne Drilling Inc	Amount of Surface Pipe Set and Cemented at1380 Feet
License:	Multiple Stage Cementing Collar Used?x Yes No
Wellsite Geologist:	
Designate Type of Completion X New Well Re-Entry Workover	If yes, show depth set 4624 Feet If Alternate II completion, cement circulated from
OilSWDSIOWTemp. Abd. _X GasENHRSIGW	feet depth to w/ sx cmt.
Dry Other (Core, WSW, Expl., Cathodic, etc)	Drilling Fluid Management Plan CB 6-6-94 (Data must be collected from the Reserve Pit)
If Workover:	
Operator:	Chloride content1100ppm Fluid volume3750bbls
Well Name:	DewateringmethodusedEvaporation
Comp. Date Old Total Depth	Location of fluid disposal if hauled offsite:
Deepening Re-perf. Conv. to Inj/SWD Plug Back PBTD PBTD	Operator Name
Dual Completion Docket No.	Lease NameLicense No
Other (SWD or Inj?) Docket No	Quarter Sec TwpS RngE/W
Spud Date Date Reached ID Completion Date	County Docket No
Derby Building, Wichita, Kansas 67202, within 120 days of Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on 12 months if requested in writing and submitted with the months). One copy of all wireline logs and geologist well in	l be filed with the Kansas Corporation Commission, 200 Colorado of the spud date, recompletion, workover or conversion of a well, side two of this form will be held confidential for a period of e form (see rule 82-3-107 for confidentiality in excess of 12 report shall be attached with this form. ALL CEMENTING TICKETS alls. Submit CP-111 form with all temporarily abandoned wells.
All requirements of the statutes, rules and regulations promulwith and the statements herein are complete and correct to the	gated to regulate the oil and gas industry have been fully complied he best of my knowledge.
Signature Loll	K.C.C. OFFICE USE ONLY F Ketter of Confidentiality Attached
TitleStaff Analyst Date	C Wireline Log Received C Geologist Report Received
Subscribed and sworn to before me this Wooday of 4/1/	Out Ch. Distribution
Notary Public Janny L. Redel	KCC SWD/Rep NGPA Other VED (Speciff) COMMISSION
Date Commission Expires $821-90$	(Specify) ON COMMISSION COMMISSION
	Form ACO-1 (7-91) MAR 0 7 1994
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Operator NameOXY U	ISA Inc		Lease Name	Greenwood	c	Well #	2	<u> </u>
	[☐ _{East}	County	Morton				
Sec15 Twp33S_	. Rge42 (-X] West					-	
INSTRUCTIONS: Show interval tested, tim hydrostatic pressures if more space is need	e tool open ar , bottom hole 1	nd closed, flowing a temperature, fluid re	and shut-in pres	sures, wheth	ner shut-in pre	ssure read	ched stat	ic level,
Drill Stem Tests Take (Attach Additional		Yes No	[X] Log	Formation	n (Top), Depth	and Datums		Sample
Samples Sent to Geold	ogical Survey	🖺 Yes 🗆 No	Name Heebnei	r	Top 3250		Datum + 248	
Cores Taken		☐ Yes 【】 No	Lansing Marmato		3334 3948		+ 164 - 450	
lectric Log Run (Submit Copy.)			Cheroke Morrow L-2 sar		4216 4432 4528		- 718 - 934 - 1030	
List All E.Logs Run: Microlog Spectral Densi Dual Inductior		d Neutron II Log						
	Report al	CASING RECORD	X New Us		production, et	c.		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Addit	
Surface	12 1/4"	8 5/8"	24	1380	See *1 Below			
Production 7 7/8" 5 1/2"		14	4624	See *2 Below				
	ADDITIONAL C	EMENTING/SQUEEZE REC	ORD			<u> </u>		
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	-	Type and Percen	t Additive	s	
Perforate Protect Casing Plug Back TD Plug Off Zone	hole 3 yd *(2) 1st Sta	Class C Pozmix w/6% g ready mix. age - Pumped 125sx 65 6 CF-2, 2%cacl & 1/4D	5/35 Class H w/69	%gel, 1/4# D	-29 + 150sx 50/	50 Class H	w/2% gel	, 12%
<u></u>								
Shots Per Foot		RECORD - Bridge Pluge of Each Interval F			Fracture, Shot, d Kind of Mater			ord epth
4	4529 - 4540			Acidized (4/300 gal 7 1/3	2% FE 	4529	-35
TUBING RECORD	 Size 2 3/8	Set At 4595	Packer At	Liner Run	☐ Yes 【】	No.		
Date of First, Resum Swab Testing	<u> </u>		None Method X	L Lowing Deur		ift 🗆 ot	her (Expl	ain)
Estimated Production Per 24 Hours	n Oil	Bbls. Gas	Mcf Water		-	Ratio		ravity
Disposition ofGaBas:	METHOD OF	COMPLETION		Prod	uction Interval	4529 - 4	540	
Vented Sold (If vented, sub		.ease	Hole T Perf.			•	•	
,		U Other	(Specify)			_		

ORIGINAL

DRILLERS LOG

OXY USA, INC.
GREENWOOD "C" #2
SECTION 15-T33S-R42W
MORTON COUNTY, KANSAS

API#15-129-21,223

COMMENCED: 11-04-93 COMPLETED: 11-14-93

SURFACE CASING: 1369' OF 8 5/8"
CMTD W/475 SX 65/35 LT "C", 2% C.C.,
1/4#/SX FLO-CELE; TAILED IN W/125 SX
"C", 2% C.C., 1/4#/SX FLO-CELE

FORMATION	DEPTH	
CONDUCTOR CASING	0- 40	
SURFACE HOLE	40-1383	
ANHYDRITE & SHALE	1383-1568	
SHALE	1568-2846	
SHALE & LIME	2846-4203	
LIME & SHALE	4203-4296	
SHALE	4296-4310	
SHALE & LIME	4310-4625 RTD	

I DO HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

CHEYENNE DRILLING, INC.

CLAUDE E. NORWOOD

STATE OF KANSAS :ss:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 17TH DAY OF NOVEMBER, 1993.

BECKY J. WHETSTONE
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 4/29/95

Becky J. Whetstone

BECKY J. WHETSTONE, NOTARY PUBLIC

RECEIVED STATE CORPORATION COMMISSION

MAR 07 1994



DOWELL SCHLUMBERGER INCORPORATED

REMITTANCE

INVOICE

REMIT TO: P 0 BOX 890788

DALLAS TX 75389-0788

INVOICE DATE

ORIGINAL

11/06/93

607491

DAY USA INC

P 0 BOX 26100 OKLAHOMA CITY

OK 73126

PAGE

INVOICE NUMBER

03-12-5683

TYPE SERVICE

CEMENTING

CEMENT SURFACE C

E0016

WELL NAME / JOB SITE	STATE	STATE COUNTY / CITY SERVICE FRO		SHIPPED VIA	CUSTOMER P.O. NO./REF.	
GREENWOOD 45 C-2	KS	MORTON	ULYSSES			
LOCATION / PL	ANT ADDRESS		DATE OF SERVICE ORDER	CUSTOMER OR AL	THORIZED REPRESENTATIVE	
SEC 15-33S-42W			11/05/93	, TERRY YODER		

		9-1573004x	236	0.1/7:	24 WS	11-29
ITEM CODE	DESCRIPTION		UOH	QTY	UNIT PRICE	AMOUNT
102871015	CSNG CHNT 1901-1500' 1ST 8HR MILEAGE. ALL OTHER EQUIPMENT		8HR MI	1 59	980.0000 . 2.6500	980.00 156.35
059200002 059697000	PACE TREAT ANALYSIS RECORDER		103		140,0000	140.00
049102000	TRANSPORTATION CONT TON MILE		MI	1675	.8800	1.474.00
049100000	SERVICE CHE CEMENT HATL LAND		CFT	663	1.2000	795.60
040003000	D903 . CEMENT CLASS C		CFT	434	7.9800	3.463.32
945008000	D035 . LITEPOZ 3 EXTENDER		CFT	166	3.9400	654.04
045014050	D20. BENTONITE EXTENDER		LBS	2481	.1500	372.15
067005100	S1.CALCIUM CHLORIDE		LBS	1063	.3600	382.68
044003025	D29. CELLOPHANE FLAKES		LBS	148	1.5900	235.32
056702085	PLUG CENG 8-5/8" TOP PLASTIC CEMENT HEAD RENTAL		EA JOB	1	98.0000	98.00 N/C
048601900			JUD		.0000	2.082.20-
	DISCOUNT - SERVICE W					1.418.38-
					SUB TOTAL	5.250.88
н с	STATE TAX ON				4.007.71	196.38
MFC	LOCAL TAX ON				4.007.71	49.08
					AMOUNT DUE	5,487.34

WITH QUESTIONS CALL 316-356-1272 FEDERAL TAX ID # 38-239-7173 TERMS -- NET 30 DAYS DUE ON OR BEFORE DEC 06, 1993

THANK YOU. WE APPRECIATE YOUR BUSINESS.

** WE CAN INVOICE YOU VIA EDI. CALL (713)556-7700 FOR INFORMATION **

CUSTOMER

DOWELL SCHLUMBERGER INCORPORATED . P.O. BOX 4378 HOUSTON, TEXAS 77210 **OILFIELD SERVICES** DSI SERVICE LOCATION NAME AND NUMBER DSI SERVICE ORDER RECEIPT AND INVOICE NO. CUSTOMER NUMBER CUSTOMER P.O. NUMBER TYPE SERVICE CODE **BUSINESS CODES** 5683 WORKOVER NEW WELL OTHER API OR IC NUMBER CXY USA ORIGINAL CUSTOMER'S NAME IMPORTANT
SEE OTHER SIDE FOR TERMS & CONDITIONS ADDRESS DAY ARRIVE LOCATION 6 0030 CITY, STATE AND I authorize work to begin per SERVICE ORDER ZIP CODE service instructions in accordance with terms and DSI will furnish and Customer shall purchase materials and services required in the performance of the conditions printed on the reverse side of this form following SERVICE INSTRUCTIONS in accordance with the general terms and conditions as printed on the and/or attached to this form and represent that I reverse side of this service order and/or attached to this service order. This service order is subject to have authority to accept and sign this order. SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE alternative dispute resolution. 0745 SERVICE RECEIPT I certify that the materials and services listed were received and all services performed in a workmanlike manner. 173664 - 23601 STATE CODE CITY SIGNATURE OF, CUSTOMER OR AUTHORIZED REPRESENTATIVE CODE COUNTY / PARISH Karisas WELL NAME AND NUMBER / JOB SITE LOCATION AND POOL / PLANT ADDRESS SHIPPED VIA/ Dowel. 15-335-42W Green wood ITEM/PRICE REF. NO. QUANTITY MATERIAL, EQUIPMENT AND SERVICES USED UNIT PRICE \$ AMOUNT UNIT 102871-015 059200-002 059697-000 049102-000 049100-000 9.80.00 Pump Truck 980.00 Ea. mileage PACK Delivery Charge 156.35 mi 140.00 40.00 Eq. 0.88 Service Charge 0903 Class''S''
D35 Litepoz3
D20 Bentonite Gel 010003-000 045008-000 16. SI CaCl2 Dag Celliphane 044003-025 16. 88" Top Plug 056702-085 98.00 E9. SUB TOTAL Field Estimate \$ 8,751.46 w, LICENSE/REIMBURSEMENT FEE LICENSE/REIMBURSEMENT FEE REMARKS: STATE % TAX ON \$ COUNTY % TAX ON \$ CITY % TAX ON \$ SIGNATURE OF DSI REPRESENTATIVE TOTAL \$ CONSERVATION DIVISION

DC 6510 12



DOWELL SCHLUMBERGER INCORPORATED

REMITTANCE

INVOICE

REMIT TO: 2 0 80% 890788

INVOICE DATE

0312

ORIGINAL

DALLAS TX 75309-0788

11/14/93

607491 UXY USA INC

P 0 BOX 26100 OKLAHOMA CITY

OK 73126

PAGE INVOICE NUMBER 03-12-5703 TYPE SERVICE

CEMENTING

CEMENT PRODUCTIO

(E0016

WELL NAME / JOB SITE	STATE	COUNTY / CITY	SERVICE FROM LOCATION	SHIPPED VIA	CUSTOMER P.O. NO./REF.	
GREENMOOD C-2	KS	MORTON	ULYSSES			
LOCATION / PI	ANT ADDRESS		DATE OF SERVICE ORDER	CUSTOMER OR AUTHORIZED REPRESEN		
SEC 15-33S-42W			11/13/93	TERRY YODER		

F 13	ART THE RESERVE THE PROPERTY OF THE PROPERTY O	9-15)3004	×	2360.1	1>24	WS 12-14
ITEM CODE	DESCRIPTION		UOH	QTY	UNIT PRICE	AMOUNT
					- Au	
102871050	CSNG CHAT 4501-5000' 1ST BHR	A Paris	BHR	1	1.479.0000	1.470.00
048016000	CEMENT PUMPER-PER ADDL STAGE		8HR	1	1.075.0000	
059200002	MILEAGE, ALL OTHER EQUIPMENT		HI	59	2.6500	156.35
059697000	PACR TREAT ANALYSIS RECORDER		JOB	1	140.0000	
049102000	TRANSPORTATION CHNT TOW HILE		HI	2105	.8800	1.852.40
949199999	SERVICE CHG CEMENT MATL LAND		CFT	845	1.2900	1,014.00
040015000	8909, CEMENT CLASS H		CFT	153	7.4700	
040003000	D903 . CEMENT CLASS C		CFT	325	7.9800	2.593.50
045008000	D035 . LITEPOZ 3 EXTENDER		CFT	292	3.9400	1,150.48
045014050	D20. BENTONITE EXTENDER		LBS	3488	.1500	523.20
045004050	D44. GRANULATED SALT		LBS	816	.1200	97.92
067005190	S1.CALCIUM CHLORIDE		LBS	252	.3600	90.72
044003025	D29. CELLOPHANE FLAKES		LDS	193	1.5900	396.87
944996959	D59. FLAC FLUID LOSS ADDITIV		LBS	63	10.2500	645.75
100283000	D827. CHEMICAL WASH CW100		BBL	30	34.2500	. 1.027.50
048601000	CEHENT HEAD RENTAL		JOB	1	.0000	N/C
	DISCOUNT - MATERIAL					3.334.69-
	DISCOUNT - MATERIAL -44 DISCOUNT - SERVICE					2.511.41-
					SUB TOTAL -	7.440.50
M C	STATE TAX ON				5.281.50	258.79
MFC	LOCAL TAX ON				5.281.50	52.82
					AMOUNT DUE -	7,752,11
		12			. amedia	11100111
		57	000	0		

WITH QUESTIONS CALL 316-356-1272 FEDERAL TAX ID 4 38-239-7173 TERMS -- NET 30 DAYS DUE ON OR BEFORE DEC 14, 1993

THANK YOU. WE APPRECIATE YOUR BUSINESS.

** WE CAN INVOICE YOU VIA EDI. CALL (713)556-7700 FOR INFORMATION **

CUSTOMER

DOWELL SCHLUMBERGER INCORPORATED P.O. BOX 4378 HOUSTON, TEXAS 77210

			,				OILF	IELD SERVICES
DSI SERVICE ORDER				,	DSI	1 11	ON NAME AND NU	0
RECEIPT AND INVOICE NO.	CU	STOMER NUMBER		CUSTOMER P	O. NUMBER	Lllyss	TYPE SERVICE	53-12 ECODE BUSINESS CODES
5703		or orner red mberr		OGGTGINETT	.0.1101115211		285	BOOMEDO GODEO
CUSTOMER'S	Oxu	ISD TOW	00	11011	1 / 1		WORKOVER NEW WELL OTHER	API OR IC NUMBER
NAME	UNY (JSA Inc	UK	(1611)	IAL			R SIDE FOR TERMS & CONDITIONS
ADDRESS							ARRIVE LOCATION	MO. DAY TYPO 16 PIME
CITY, STATE AND ZIP CODE								ER I authorize work to begin per
DSI will furnish an following SERVICE reverse side of this alternative dispute	INSTRUCTION S Service or Control	NS in accordance	with the genera	I terms and co	onditions as	printed on the	conditions printe and/or attached have authority to	ons in accordance with terms and on the reverse side of this form I to this form and represent that a accept and sign this order.
							100	MO. DAY YR. TIME
			- 1			~ ` ` `	JOB COMPLETION	11/14/93/0900
			7-	5)30		2 16	SERVICE RECEI	PT I certify that the materials and vere received and all services per-
STATE	CODE	OUNTY / PARISH	CODE	CITY			formed in a work	tomer or authorized representative
Kansas	SODE	Morter					X	11
WELL NAME AND NUMBER / JO	OB SITE	1	-6			ANT ADDRESS		SHIPPED VIA
Greenwood (-2	NF	-6			5-42W		Dowell.
ITEM/PRICE REF. NO.	MAT	ERIAL, EQUIPMEN	T AND SERVICES	USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
102871-050 048016-000 059200-002 059197-000 049102-000	Mul-	age	ingel cer arge	menting	Eg. Eg. Fg. Fmi cf	59 2105 845	1,470.0 1,075.0 2,65 140.0 0,88	1,075.00 156.35 140.00 1,8 52. 40
040015-000 040003-000 045008-000 045014-050 045004-050 067005-100 044003-025	144	Class" Class" Class" Litepoz Bentanit Salt Callopha Fluid los	ine flak	'e	ccchibbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbb	153 325 292 3488 253 193	7.47 7.98 3.94 0.15 0.12 0.36 1.59 10.25	1,142,91 2,593.50 1,150,48 523.20 97.92 90.72 30,527 645.75
100283-000	0827	CW100)		BB1	30	34.25	1027.50
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Field Estima	ate \$	13, 286	60 W/	but D	ISCOU	ot.	SUB TO	TAL T
		,	LICENSE/REIMBURS					and had been at a hear took
		l	LICENSE/REIMBURS					MELETY EN
REMARKS:				STATE		% TAX ON		STATE CORPORATION COM
Thanks for	<u> </u>		,	COUNTY		% TAX ON		MAR 0 7 1994
Thanks for using Dow	rell			SIGNATURE OF	DSI REPRESEN	% TAX ON		OTAL \$
43119 1000	,			Sta	e 11.	Terrel		CONSERVATION DIVISION WIGHTS Kannas