

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1

September 1999

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WELL COMPLETION FORM

Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5447  
 Name: OXY USA, Inc.  
 Address: P.O. Box 2528  
 City/State/Zip: Liberal, KS 67905  
 Purchaser: Pending  
 Operator Contact Person: Jerry Hunt  
 Phone: (316) 629-4200  
 Contractor: Name: \_\_\_\_\_  
 License: \_\_\_\_\_  
 Wellsite Geologist: Tom Heflin  
 Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Temp. Ab.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl, Cathodic, etc)

API No. 15 - 175-21808-0000  
 County: Seward  
 Address: SEP 03 2000 - SE - SW - SE Sec 16 Twp. 32 S. R. 34W  
642 feet from (S) N (circle one) Line of Section  
1612 feet from (E) W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE (SE) NW SW  
 Lease Name: Kapp A Well #: 6  
 Field Name: Unnamed  
 Producing Formation: \_\_\_\_\_  
 Elevation: Ground: 2926 Kelly Bushing: 2938  
 Total Depth: 6350 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at 1741 feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set \_\_\_\_\_

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RECEIVED  
STATE CORPORATION COMMISSION  
9-11-2000

RELEASED

MAR 18 2002

If Workover/Re-entry: Old Well Info as follows:  
 Operator: \_\_\_\_\_  
 Well Name: \_\_\_\_\_  
 Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
 Deepening  Re-perf.  Conv. To Enhr./SWD  
 Plug Back  Plug Back Total Depth \_\_\_\_\_  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?)  Docket No. \_\_\_\_\_  
08/08/00 08/17/00  
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

If Alternate II completion, cement circulated from \_\_\_\_\_  
 feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.  
 Drilling Fluid Management Plan ACT 1 P's A DPW  
3-18-02  
 (Data must be collected from the Reserve Pit)  
 Chloride content 900 ppm Fluid volume 1700 bbls  
 Dewatering method used Evaporation  
 Location of fluid disposal if hauled offsite: \_\_\_\_\_  
 Operator Name: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R.  East  West  
 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 6702, 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 of 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: Jerry Hunt  
 Title: Capital Project Date 09-08-00  
 Subscribed and sworn to before me this 8th day of Sept.  
20 00  
 Notary Public: Helen M. Smith  
 Date Commission Expires: \_\_\_\_\_

NOTARY PUBLIC, State of Kansas  
 Seward County  
 HELEN M. SMITH  
 My Appt. Exp. 3-5-2001

KCC Office Use Only  
 Letter of Confidentiality Attached  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
 KCC

X

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Side Two

Operator Name: OXY USA, Inc. Lease Name: Kapp A Well # 1011307100  
 Sec. 16 Twp. 32 S. R. 34W  East  West County: Seward

**Instructions:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:      Geo. Report      Induction Log Neutron Log      Gamma Ray Log	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Heebner</td> <td>4180</td> <td>-1244</td> </tr> <tr> <td>Toronto</td> <td>4200</td> <td>-1262</td> </tr> <tr> <td>Lansing</td> <td>4276</td> <td>-1338</td> </tr> <tr> <td>Marmaton</td> <td>4968</td> <td>-2030</td> </tr> <tr> <td>Morrow</td> <td>5574</td> <td>-2636</td> </tr> <tr> <td>Chester</td> <td>5804</td> <td>-2864</td> </tr> <tr> <td>St. Louis</td> <td>6214</td> <td>-3374</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Heebner	4180	-1244	Toronto	4200	-1262	Lansing	4276	-1338	Marmaton	4968	-2030	Morrow	5574	-2636	Chester	5804	-2864	St. Louis	6214	-3374
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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
Conductor					C		
Surface	12 1/4	8 5/8	24	1741		455	3% CC, 1/2# Flocele
Production					C		

### 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
	Plug well as follows per/KCC: 100 sxs at 3190',	50 sxs at 1760', 40 sxs at 630',	
	10 sxs at 40'. Plug Rat Hole w/ 15 sxs and Mouse	Hole w/10 sxs. All cement 60/40 POZ, 6%	
	Gel, by Halliburton. Completed @ 11:30 PM 8/18/00		

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
			<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain)    P&A		
Estimated Production Per 24 Hours	Oil BBLs	Gas Mcf	Water Bbls	Gas-Oil Ratio	Gravity

Disposition of Gas      METHOD OF COMPLETION      Production Interval

Vented     Sold     Used on Lease       Open Hole     Perf.     Dually Comp.     Commingled \_\_\_\_\_  
*(If vented, Submit ACO-18)*

Other (Specify) \_\_\_\_\_ P&A