

CONFIDENTIAL

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

ORIGINAL

API NO. 15-175-21327-0000

County Seward

C - NE - SE - SW Sec. 21 Twp. 32 Rge. 34 EW

990 Feet from S/x (circle one) Line of Section

2970 Feet from E/x (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
xx, SE, xx or xx (circle one)

Lease Name Marteney A Well # 4

Field Name Holt

Producing Formation Chester

Elevation: Ground 2925 KB 2937

Total Depth 6400 PBDT

Amount of Surface Pipe Set and Cemented at 1693 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set Feet

If Alternate II completion, cement circulated from

feet depth to w/ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 7500 ppm Fluid volume 7800 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite:

Operator Name RELEASED

Lease Name License No.

Quarter Sec. Twp. S Rng. E/W

County FROM CONFIDENTIAL

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 26100

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

Purchaser:

Operator Contact Person: Jerry Ledlow KCC

Phone (405) 749-2309

Contractor: Name: Cheyenne NOV 29

License: 5382 CONFIDENTIAL

Wellsite Geologist:

Designate Type of Completion

X New Well Re-Entry Workover

X Oil SWD SLOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator:

Well Name:

Comp. Date Old Total Depth

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBDT

Commingled Docket No.

Dual Completion Docket No.

Other (SWD or Inj?) Docket No.

8/6/93 Spud Date 8/18/93 Date Reached TD Pending Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 Ops Mgr Date 11/30/93
Subscribed and sworn to before me this 30th day of November 19 93.
Notary Public Jimmy R Padilla
Date Commission Expires 8-21-96

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
STATE CORPORATION COMMISSION

Form ACO-1 (7-91) DEC 03 1993
12-03-93
CONSERVATION DIVISION
Wichita, Kansas
P1

Operator Name OXY USA Inc. Lease Name Marteny A Well # 4

Sec. 21 Twp. 32S Rge. 34 East West
 County Seward

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 Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

List All E.Logs Run:
 Compensated Neutron Litho-Density
 Dual-Induction SFL
 Microlog
 Borehole Compensated Sonic

Log Sample

Name	Top	Datum
Winfield	2685	+ 251
Council Grove	2922	+ 14
Heebner	4178	- 1242
Toronto	4201	- 1265
Morrow	5660	- 2724
Chester	5858	- 2922
St Louis	6324	- 3388

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	12 1/4"	8 5/8"	24	1693	C	650	6% gel, 2% cact
Production	7 7/8"	5 1/2"	14	3040	C	505	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate	Top Bottom			
Protect Casing				
Plug Back TD				
Plug Off Zone				

PERFORATION RECORD - Bridge Plugs Set/Type

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD

Size _____ Set At _____ Packer At _____ Liner Run Yes No

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

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

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled

Other (Specify) _____

Production Interval _____

ORIGINAL

CONFIDENTIAL

DRILLERS LOG

OXY USA, INC.
MARTENY "A" #4
SECTION 21-T23S-R34W
SEWARD COUNTY, KANSAS

API #15-175-21327

COMMENCED: 08-06-93
COMPLETED: 08-18-93

KCC

NOV 29

CONFIDENTIAL

SURFACE CASING: 1695' OF 8 5/8"
OMTD W/525 SX PREM PLUS LITE, 2% C.C.,
1/4#/SX FLO-CELE; TAILED IN W/
125 SX PREM PLUS, 2% C.C., 1/4#/SX FLO-CELE

FORMATION	DEPTH
CONDUCTOR CASING	0- 40
SURFACE HOLE	40-1697
RED BED	1697-2605
SHALE & LIME	2605-3198
LIME & SHALE	3198-3386
SHALE & LIME	3386-4595
LIME & SHALE	4595-4771
SHALE & LIME	4771-5372
LIME & SHALE	5372-5497
SHALE & LIME	5497-6400

RTD

RELEASED

DEC 22 1994

FROM CONFIDENTIAL

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

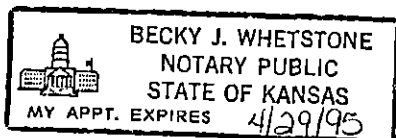
CHEYENNE DRILLING, INC.

A.J. Jacques

A.J. JACQUES

STATE OF KANSAS :ss:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 18TH DAY OF AUGUST, 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

DEC 03 1993

CONSERVATION DIVISION
Wichita, Kansas



Leadlow

ORIGINAL

CHARGE TO: **OXY USA INC.**
 ADDRESS: **P.O. BOX 26100**
 CITY, STATE, ZIP CODE: **OKLA. CITY OKLA. 73126-0100**

No.

TICKET 50
 OXY USA
 NOV 29 1993
 NATIONAL DIVISION
 CONFIDENTIAL

FORM 1906 R-12

SERVICE LOCATIONS 1. LIBERAL KS.	WELL/PROJECT NO. A-4	LEASE MARTENEY	COUNTY/PARISH SEWARD	STATE KS.	CITY/OFFSHORE LOCATION	DATE 8-6-93	OWNER OXY USA
2. HUGOTON KS.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES <input type="checkbox"/> NO	CONTRACTOR CHEYENNE DR LG	RIG NAME/NO. CHEYENNE 4#	SHIPPED P.U.	DELIVERED TO LOCATION	ORDER NO.
3.	<input type="checkbox"/> SALES						
4.	WELL TYPE 01	WELL CATEGORY 01	JOB PURPOSE 010	WELL PERMIT NO.	WELL LOCATION		
REFERRAL LOCATION	INVOICE INSTRUCTIONS Cement Surface Casing						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
000-117						MILEAGE	20	Mi	1	UNIT	2.75	55-
001-016						PUMP CHARGE	1697	H	8	HR		1105-
030-018						5W TOP PLUG	8 5/8	in	1	EA		130-
CONFIDENTIAL ORIGINAL KCC NOV 29 CONFIDENTIAL RELEASED DEC 22 1994 FROM CONFIDENTIAL												

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.				SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN				SURVEY AGREE UN-DECIDED DIS-AGREE		PAGE TOTAL 1280	
CUSTOMER OR CUSTOMER'S AGENT SIGNATURE X <i>[Signature]</i>				TYPE LOCK DEPTH		OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? <input checked="" type="checkbox"/>		FROM CONTINUATION PAGE(S) 7341 150			
DATE SIGNED 8-7-93				TIME SIGNED 0030		WE UNDERSTOOD AND MET YOUR NEEDS? <input checked="" type="checkbox"/>					
CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) JAY Muse				CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X <i>[Signature]</i>		OUR SERVICE WAS PERFORMED WITHOUT DELAY? <input checked="" type="checkbox"/>					
TUBING SIZE TUBING PRESSURE WELL DEPTH				TYPE OF EQUALIZING SUB. CASING PRESSURE		WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? <input checked="" type="checkbox"/>					
TREE CONNECTION TYPE VALVE				ARE YOU SATISFIED WITH OUR SERVICE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE 8631.50					
<input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered				<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND							

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) JAY Muse	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X <i>[Signature]</i>	HALLIBURTON OPERATOR/ENGINEER Jim Broadway	EMP # D4604	HALLIBURTON APPROVAL 74p 367	8631.50
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FIELD **CONSERVATION DIVISION Wichita, Kansas** SEC. **21** TWP. **32S** RNG. **34W** COUNTY. **SEWARD** STATE **Ks.**

FORMATION NAME _____ TYPE _____
 FORMATION THICKNESS _____ FROM _____ TO _____
 INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD
 PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD
 COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____
 PACKER TYPE _____ SET AT _____
 BOTTOM HOLE TEMP. _____ PRESSURE _____
 MISC. DATA _____ TOTAL DEPTH _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	N	24	8 5/8	KB	1697	
LINER						
TUBING						
OPEN HOLE PERFORATIONS			ORIGINAL 12 1/4	KB	1697	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		KCC
FLOAT SHOE		NOV 29
GUIDE SHOE		CONFIDENTIAL
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG	5W Alum. 8 5/8	Howco
HEAD		
PACKER		
OTHER		

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 8-6-93	DATE 8-7-93	DATE 8-7-93	DATE 8-7-93
TIME 2200	TIME 0400	TIME 0412	TIME 0512

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
BROADFOOT J4604	40048	LIBERAL Ks.
SAUBER 64781	52276 76900	"
DAVIS F4550	52920 5503	HUGOTON Ks.
THOMAS F5951	4461 4734	"

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB./GAL. °API
 DISPL. FLUID _____ DENSITY _____ LB./GAL. °API
 PROP. TYPE _____ SIZE _____ LB.
 PROP. TYPE _____ SIZE _____ LB.
 ACID TYPE _____ GAL. _____ %
 ACID TYPE _____ GAL. _____ %
 ACID TYPE _____ GAL. _____ %
 SURFACTANT TYPE _____ GAL. _____ IN
 NE AGENT TYPE _____ GAL. _____ IN
 FLUID LOSS ADD. TYPE _____ GAL.-LB. _____
 GELLING AGENT TYPE _____ GAL.-LB. _____
 FRIC. RED. AGENT TYPE _____ GAL.-LB. _____
 BREAKER TYPE _____ GAL.-LB. _____
 BLOCKING AGENT TYPE _____ GAL.-LB. _____
 PERFPAC BALLS TYPE _____
 OTHER _____
 OTHER _____

DEPARTMENT **CEMENT**
 DESCRIPTION OF JOB **CEMENT 8 5/8" SURFACE CSG.**
 JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.
 CUSTOMER REPRESENTATIVE **X**
 HALLIBURTON OPERATOR **Jim Broadfoot** COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
1	525	PREM PLUS LT.		B	2% C.C. - 1/4# FLOCELE	2.1	12.3
	125	PREM PLUS		B	2% C.C. - 1/4# FLOCELE	1.32	14.8

PRESSURES IN PSI

CIRCULATING _____ DISPLACEMENT _____
 BREAKDOWN _____ MAXIMUM _____
 AVERAGE _____ FRACTURE GRADIENT _____
 SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____
 HYDRAULIC HORSEPOWER _____
 ORDERED _____ AVAILABLE _____ USED _____
 AVERAGE RATES IN BPM _____
 TREATING _____ DISPL. _____ OVERALL _____
 CEMENT LEFT IN PIPE **45**
 FEET _____ REASON **SHOE JT.**

SUMMARY

VOLUMES
 PRESLUSH: BBL. GAL. **10** TYPE **H2O**
 LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. **105**
 CEMENT SLURRY: BBL. GAL. **196 - 29**
 TOTAL VOLUME: BBL.-GAL. _____

REMARKS

40 BBL CMT TO PIT
107 SKS CMT PIT

CUSTOMER **OKY USA INC.**
 LEASE **MARTENEY**
 WELL NO. **A-4**
 JOB TYPE **8 5/8 SURFACE CSG**
 DATE **8-7-93**

JOB LOG FORM 2013 R-3

 CUSTOMER: **OKY USA INC.** WELL NO.: **A-4** LEASE: **MARTENEY** JOB TYPE: **8 5/8 SURFACE CSG.** TICKET NO.: **507578**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0200							CALLED OUT READY 0130
	0206							ON LOCT L.D.D.P.
	0135							START CSG IN HOLE
	0334							HOOKE UP HEAD TO CIRCULATE
	0344							CIRCULATION TO PIT
	0412							HOOKE UP CMT LINE TO TRUCK
	0414	5	10					START SPACER H ² O
	0416	7	196					START LEAD CMT 12.3 ⁴ /GAL
	0444	5	39					START TAIL CMT. 14.8 ⁹ /GAL
	0452	0	0					SHUT DOWN DROP TOP PLUG
	0455	8	95					START DISPLACEMENT H ² O
	0507	2	105					SLOW RATE
	0512	0	0					LANDED PLUG - FLOAT HELD
								JOB OVER
								40 ^{66L} CMT TO PIT
								107 SKS PIT
								THANKS FOR CALLING
								HALLIBURTON ENERGY SERVICES
								LIBERAL KS.
								Tim BROADFOOT & CREW

RELEASED

DEC 2-2 1994

FROM CONFIDENTIAL

CUSTOMER COPY

INVOICE



HALLIBURTON ENERGY SERVICES

CONFIDENTIAL

ORIGINAL

REMIT TO: P.O. BOX 951046 DALLAS, TX 75395-1046

INVOICE NO. 507560 DATE 08/17/1994

WELL LEASE NO./PROJECT		WELL/PROJECT LOCATION		STATE	OWNER
MARTENEY A-4		SEWARD		KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE		TICKET DATE	
LIBERAL	CHEYENNE DRILLING	CEMENT PRODUCTION CASING		08/17/1994	
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
659167	JAY MUSE	E-26		COMPANY TRUCK	5525

OXY USA INC. REGIONAL OFFICE ATT: G. I. MCFARLAND PO BOX 26100 OKLAHOMA CITY, OK 73126-0100

KCC NOV 29

DIRECT CORRESPONDENCE TO: OKLAHOMA TOWER 210 WEST PARK AVENUE SUITE 2000 OKLAHOMA CITY, OK 73102-5601

9-1572935 x 2360.1/2A

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
000-117	MILEAGE	20	MI	2.75	55.00
		1	UNT		
001-016	CEMENTING CASING	3040	FT	1,285.00	1,285.00
		1	UNT		
030-016	CEMENTING PLUG 5W ALUM TOP	5 1/2	IN	60.00	60.00
		1	EA		
018-315	MUD FLUSH	840	GAL	.65	546.00
504-120	CEMENT - HALL. LIGHT PREM PL	245	SK	8.05	1,972.25
504-050	CEMENT - PREMIUM PLUS	130	SK	8.95	1,163.50
506-105	POZMIX A	9620	LB	.067	644.54
506-121	HALLIBURTON-GEL 2X	4	LB	.00	N/C
507-210	FLOCELE	126	LB	1.40	176.40
507-775	HALAD-322	131	LB	6.90	903.90
509-406	ANHYDROUS CALCIUM CHLORIDE	9	SK	28.25	254.25
500-207	BULK SERVICE CHARGE	531	CFT	1.25	663.75
500-306	MILEAGE CMTG MAT DEL OR RETU	550.176	TMI	.85	467.65

INVOICE SUBTOTAL

8,192.24

DISCOUNT-(BID)

RELEASED

2,949.19

INVOICE BID AMOUNT

5,243.05

*-KANSAS STATE SALES TAX *-SEWARD COUNTY SALES TAX

DEC 2 2 1994

197.77

40.37

FROM CONFIDENTIAL

1352

006

5/6

RECEIVED STATE COMMISSION

DEC 03 1994

RECEIVED CONSERVATION DIVISION

RECEIVED

INVOICE TOTAL - PLEASE PAY THIS AMOUNT

\$5,481.19

AFFIX JOB TKT

TERMS: If Customer does not have an approved open account with Halliburton, all sums due are payable in cash at the time of performance of services or delivery of equipment, products or materials. If customer has an approved open account, invoices are payable on the twentieth day after date of invoice. Customer agrees to pay interest on any unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Halliburton employs an attorney for collection of any account, Customer agrees to pay attorney fees of 20% of the unpaid account, plus all collection and court costs.

FORM 1900-R5

PAGE 1



CHARGE TO: **USA**
 ADDRESS: **USA**
 CITY, STATE, ZIP CODE: **USA**

COPY: **1**
 No. **507560 - 9**
 TICKET: **507560 - 9**
 PAGE: **1**

FORM 1906 R-12

SERVICE LOCATIONS	WELL/PROJECT NO.	LEASE	COUNTY/PARISH	STATE	CITY/OFFSHORE LOCATION	DATE	OWNER
1. 25520	A-1	MARENY	SEWARD	Ks		8	USA
2. 25535							
3.							
TICKET TYPE		NITROGEN JOB?	CONTRACTOR	RIG NAME/NO.	SHIPPED VIA	DELIVERED TO	ORDER NO.
<input checked="" type="checkbox"/> SERVICE		<input type="checkbox"/> YES	LYONS		TRUCK	LOCATION	
<input type="checkbox"/> SALES		<input checked="" type="checkbox"/> NO					
WELL TYPE	WELL CATEGORY	WELL PERMIT NO.	WELL LOCATION	WELL PERMIT NO.	WELL LOCATION	WELL PERMIT NO.	WELL LOCATION
02	01	035					
REFERRAL LOCATION	INVOICE INSTRUCTIONS						
	LAST 5 1/2 156						

CONFIDENTIAL

PRICE REFERENCE	SECONDARY REFERENCE/PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
000-117						MILEAGE	20				2.75	550.00
001-016	ORIGINAL					Pumping Service	8	HR	3000'			1285.00
030-016						5-W Top Pole	1	EA	55"			60.00
018-315						MOB FLUO	840	640			.66	546.00

ORIGINAL
KCC
NOV 29
CONFIDENTIAL

RELEASED
DEC 2 2 1994

FROM CONFIDENTIAL

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.				SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN				SURVEY		AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL 1946.00
CUSTOMER OR CUSTOMER'S AGENT SIGNATURE X <i>Jay Muse</i>				TYPE LOCK	DEPTH		OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					FROM CONTINUATION PAGE(S) 6246.24	
DATE SIGNED 8-7-93				BEAN SIZE	SPACERS		WE UNDERSTOOD AND MET YOUR NEEDS?						SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE 8192.24
TIME SIGNED 2:00				TYPE OF EQUALIZING SUB.	CASING PRESSURE		OUR SERVICE WAS PERFORMED WITHOUT DELAY?						
<input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered				TUBING SIZE	TUBING PRESSURE	WELL DEPTH		WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
				TREE CONNECTION	TYPE VALVE		ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO						
				<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND									

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES				The customer hereby acknowledges receipt of the materials and services listed on this ticket			
CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) JAY Muse		CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X <i>Jay Muse</i>		HALLIBURTON OPERATOR/VENTILATOR <i>Kent ...</i>		EMP # C1395	
HALLIBURTON APPROVAL							

WELL DATA

FIELD _____ SEC _____ TWP. _____ RING _____ COUNTY *SEWARD* STATE *Ks*

FORMATION NAME _____ TYPE **ORIGINAL**

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC. DATA _____ TOTAL DEPTH *3066-PB*

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<i>N</i>	<i>10</i>	<i>5.5</i>	<i>113</i>	<i>3040</i>	
LINER						
TUBING						
OPEN HOLE			<i>7 7/8</i>	<i>8 3/8</i>	<i>3066</i>	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		<i>KGC</i>
FLOAT SHOE		
GUIDE SHOE		<i>NOV 29</i>
CENTRALIZERS		
BOTTOM PLUG		<i>CONFIDENTIAL</i>
TOP PLUG <i>5-1/2</i>	<i>5/2</i>	<i>1</i>
HEAD		<i>Hexo</i>
PACKER		
OTHER		

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <i>8-17</i>	DATE <i>8-17</i>	DATE <i>8-17</i>	DATE <i>8-17</i>
TIME <i>1700</i>	TIME <i>2020</i>	TIME <i>2100</i>	TIME <i>2400</i>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<i>Kinsinger</i>	<i>C1593</i>	<i>Liberal</i>
<i>Poyner</i>	<i>42120</i>	<i>"</i>
<i>MALIN</i>	<i>E4549</i>	<i>Hexo</i>
<i>THOMAS</i>	<i>4934</i>	<i>"</i>

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB./GAL. °API

DISPL. FLUID _____ DENSITY _____ LB./GAL. °API

PROP. TYPE _____ SIZE _____ LB.

PROP. TYPE _____ SIZE _____ LB.

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

SURFACTANT TYPE _____

NE AGENT TYPE _____ GAL. _____ IN

FLUID LOSS ADD. TYPE _____ GAL.-LB.

GELLING AGENT TYPE _____ GAL.-LB. _____ IN

FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN

BREAKER TYPE _____ GAL.-LB. _____ IN

BLOCKING AGENT TYPE _____ GAL.-LB. _____

PERFAC BALLS TYPE _____ QTY. _____

OTHER *3) All MUA Fluid*

OTHER _____

DEPARTMENT *5001*

DESCRIPTION OF JOB *5 1/2 CS*

JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE *X*

HALLIBURTON OPERATOR *Kinsinger*

COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
<i>1</i>	<i>245</i>	<i>35/65 " API</i>		<i>B</i>	<i>17.7 Gal - 2% CL - 1/4 FLOCCLE</i>	<i>2.1</i>	<i>12.2</i>
<i>2</i>	<i>260</i>	<i>50/90 " API</i>		<i>B</i>	<i>29 Gal - 2% CL - 1/4 FLOCCLE - 1/2 GARDOL</i>	<i>1.35</i>	<i>13.8</i>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESFLUSH: BBL.-GAL. *20* TYPE *MUA Fluid*

BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN. _____ CEMENT SLURRY: BBL.-GAL. *153*

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

ORDERED _____ AVAILABLE _____ USED _____

AVERAGE RATES IN BPM _____

TREATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET *41* REASON *See Log*

RECEIVED
CORPORATION TRANSMISSION
RAMARKS
DEC 03 1993
CONSERVATION DIVISION
Wichita, Kansas

CUSTOMER
LEASE
WELL NO.
JOB TYPE
DATE

JOB LOG FORM 2013 R-3

CUSTOMER: Okla USA	WELL NO.: A 4	LEASE: MARTENEY	JOB TYPE: S/L S	TICKET NO.: 577550
---------------------------	----------------------	------------------------	------------------------	---------------------------

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1700							KCO
	2000							NOV 29
	2110							CONFIDENTIAL
	2120							High circulation - SURETY WITH
	2135							hook up To Case Line
	2140	4	20				200	Pump 20 80L Mud Fluid
	2146	6	92				250	Pump Less Surety - 12.23 - Good Return
	2201	6	61				250	Pump Tail Surety - 13.24
	2210							Surety in Drop Top Pore Fluids
	2212	6					500	Displace w/ H₂O - Good Return
	2223	6-2	63				1000/800	Slow Rate
	2230		73				1000/600	Pump Down - Fluid Good - Recovered From Location

ORIGINAL

RELEASED
DEC 22 1994
FROM CONFIDENTIAL

RECEIVED
 STATE CORPORATION COMMISSION
DEC 03 1993
 CONSERVATION DIVISION
 Kansas

AMENDED REPORT *
SIDE ONE

FORM MUST BE TYPED

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

ORIGINAL

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 26100

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

Purchaser: * Enron

Operator Contact Person: Jerry Ledlow

Phone (405) 749-2309

Contractor: Name: Cheyenne

License: 5382

Wellsite Geologist: _____

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

8/6/93 _____ 8/18/93 _____ * 3/3/0/94 _____
Spud Date Date Reached TD Completion Date

API NO. 15-175-21327 _____
County Seward _____
C - NE - SE - SW Sec. 21 Twp. 32S Rge. 34 X W

990 Feet from S/x (circle one) Line of Section

2970 Feet from E/x (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
xx, (SE) xx or xx (circle one)

Lease Name Marteney A Well # 4

Field Name Holt

Producing Formation Chester

Elevation: Ground 2925 KB 2937

Total Depth 6400 PBSD _____

Amount of Surface Pipe Set and Cemented at 1693 Feet

Multiple 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 ALT 1 JH 9-2-94
(Data must be collected from the Reserve Pit)

Chloride content 7500 ppm Fluid volume 7800 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ 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, 200 Colorado Derby Building, 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 Jerry Ledlow

Title STAFF ASSISTANT Date 4/26/94

Subscribed and sworn to before me this 26th day of April

19 9394

Notary Public Sammy L. Padilla

Date Commission Expires 8-21-96

K.C.C. OFFICE USE ONLY	
F <input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C <input checked="" type="checkbox"/>	Wireline Log Received
G <input checked="" type="checkbox"/>	Geologist Report Received
Distribution <input type="checkbox"/> SWD/Rep <input type="checkbox"/> NGPA <input type="checkbox"/> Plug <input type="checkbox"/> Other (Specify)	
APR 28 1994 CONSERVATION DIVISION WICHITA, KANSAS	

P1

SIDE TWO

Operator Name OXY USA Inc. Lease Name Martenev A Well # 4

Sec. 21 Twp. 32S Rge. 34 East West
 County Seward

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 Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

List All E.Logs Run:
 Compensated Neutron Litho-Density
 Dual-Induction SFL
 Microlog
 Borehole Compensated Sonic

Log Sample

Name	Formation (Top), Depth and Datums	Top	Datum
Winfield		2685	+ 251
Council Grove		2922	+ 14
Heebner		4178	- 1242
Toronto		4201	- 1265
Morrow		5660	- 2724
Chester		5858	- 2922
St Louis		6324	- 3388

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	12 1/4"	8 5/8"	24	1693	C	650	6% gel, 2% cacl
Production	7 7/8"	5 1/2"	14	3040	C	505	

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

TUBING RECORD

Size 2 3/8 Set At 2736 Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. * 2/17/94 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas 320 Mcf	Water 646 Bbls.	Gas-Oil Ratio	Gravity

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

(If vented, submit ACO-18.) Other (Specify) _____

* Production Interval 2585-2690