KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY – DESCRIPTION OF WELL & LEASE

Operator: License # ____________ 5447
Name: ____________ OXY USA Inc.
Address: ____________ P.O. Box 2526
City/State/Zip: ____________ Liberal, KS 67905
Purchaser: ____________ Regency
Operator Contact Person: ____________ Vicki Carder
Phone: ____________ (620) 629-4200
Contractor: Name: Murfin Drilling Co., Inc.
License: ____________ 30606
Wellsite Geologist: ____________ NA
Designate Type of Completion:
___ X New Well ______ Re-Entry ______ Workover
___ Oill SWD ______ SIOW ______ Temp. Abd.
___ X Gas ______ ENHR ______ SIGW
___ Dry ______ Other (Core, WSW, Expl, Cathodic, etc)
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. ____________
06/09/04 ____________ 06/10/04 ____________ 06/24/04
Spud Date or Recompletion Date ______ Date Reached TD ______ Completion Date or Recompletion Date

API No. 15 - 081-21530-0000
County: ____________ Haskell
NE - NE - SW - SW Sec. 18 Twp. 27 S. R. 33W
1250 ______ feet from circle line of Section
1250 ______ feet from E circle line of Section
Footages Calculated from Nearest Outside Section Corner: (circle one) NE SE NW SW

Lease Name: ____________ Frey B ______ Well #: ____________ 4
Field Name: ____________ Panoma Field
Producing Formation: ____________ Panoma Council Grove
Elevation: Ground: ____________ 2960 ______ Kelly Bushing: ____________ 2971
Total Depth: ____________ 3100 ______ Plug Back Total Depth: ____________ 3057
Amount of Surface Pipe Set and Cemented at ____________ 957 ______ feet
Multiple Stage Cementing Collar Used? ______ Yes ______ No
If yes, show depth set ______
If Alternate II completion, cement circulated from ______
feet depth to ______ w/ ____________ sx cmt.

Drilling Fluid Management Plan
(Date must be collected from the Reserve Pit)
Cloride Content ____________ 11000 mg/l ppm Fluid Volume ____________ 875 ______ bbls
Dewatering method used ______ Evaporation
Location of fluid disposal if hauled offsite:
Operator Name: ____________
Lease Name: ____________ License No.: ____________
County: ____________ Docket No.: ____________

INSTRUCTIONS: An original an 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 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: ____________
Title: Capital Project ______ Date September 23, 2004
Subscribed and sworn to before me this 23rd day of September 2004
Notary Public: ____________
Date Commission Expires: ____________

KCC Office Use Only

Letter of Confidentiality Attached
If Denied, Yes ______ Date: ____________
Wireline Log Received
Geologist Report Received
UIC Distribution

NOTARY PUBLIC – State of Kansas
1. KATHLEEN R. POULTON
My Appt. Exp. 11-8-06