

API No.
35-017-25062

OCC/OOC Operator No.
017-222789

CEMENTING REPORT
To Accompany Completion Report

Form 1002C
Rev. 1996

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000
OAC 105-10-3-A(a)

All operators must include this form when submitting the Completion Report (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 105-10-3-4(b). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name				OCC District
*Operator	Marathon Oil			OCC/OOC Operator No. 01363
*Well Name/No.	Betty Crowley 1107 1-2MH			County Canadian County, OK
*Location	SW 1/4 SE 1/4 SW 1/4 SE 1/4	Sec 2	Twp 11N	Rge 7W

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date		10/8/2017				
*Size of Drill Bit (inches)		12 1/4				
*Estimated % wash or hole enlargement used in calculations		100%				
*Size of Casing (inches O.D.)		9 5/8				
*Top of Liner (if liner used) (ft.)		NA				
*Setting Depth of Casing (ft.) from ground level		995.64				
Type of Cement (API Class) in first (lead) or only slurry		A				
In second slurry		A				
In third slurry		NA				
Bags of Cement Used in first (lead) or only slurry		200				
In second slurry		150				
In third slurry		NA				
Vol of slurry pumped (Cu ft) (14 X 15) in first (lead) or only slurry		686				
In second slurry		177				
In third slurry		NA				
Calculated Annular Height of Cement behind Pipe (ft)		995.64				
Cement left in pipe (ft)		48.51				

*Amount of Surface Casing Required (from Form 1000)

1500 ft.

*Was cement circulated to Ground Surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (CV Tool) used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*Was Cement Bond Log run?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth?	ft.

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM


* Designates items to be completed by Operator.
Items not so designated shall be completed by the Cementing Company.

Remarks		
Lead Slurry:	200	Sacks
200 Sacks Class A, 2% Gypsum, 2% Calcium Chloride, 2% SMS, 0.25 lbs Poly Flake		
Tail Slurry:	150	Sacks
150 Sacks Class A		

Remarks


CEMENTING COMPANY

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.


Signature of Cementing Company Representative

OPERATOR

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.


Signature of Operator or Authorized Representative

Name & Title Printed or Typed	
Aaron Waddle-Service Supervisor	
Spinnaker Oilfield Services LLC	
Address	
3675 Affidale	
City	
El Reno	
State	Zip
OK	73036
Telephone (AC) Number	
1-405-265-2804	
Date	
October 8, 2017	

Name & Title Printed or Typed	
Suzie Gump - Regulatory Tech.	
Operator	
Marathon Oil Company	
Address	
7301 N.W. Expressway	
City	
Oklahoma City	
State	Zip
OK	73132
Telephone (AC) Number	
(405) 728-5205	
Date	
2/1/18	

INSTRUCTIONS

- This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.
 - An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
 - The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
- Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
- Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.**

API No.
35-017-25062

OTC/OCC Operator No.
017-200789

CEMENTING REPORT
To Accompany Completion Report

Form 1002C
Rev. 1986

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000
OAC 165-10-3-4(h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165-10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name	OCC District
*Operator Marathon Oil	OCC/OTC Operator No. 01363
*Well Name/No. Betty Crowley 1107 1-2MH	County Canadian County, OK
*Location SW 1/4 SE 1/4 SW 1/4 SE 1/4	Sec 2
	Twp 11N
	Rge 7W

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date				10/14/2017		
*Size of Drill Bit (Inches)				8 3/4		
*Estimated % wash or hole enlargement used in calculations				30%		
*Size of Casing (Inches O.D.)				7		
*Top of Liner (if liner used) (ft.)				NA		
*Setting Depth of Casing (ft.) from ground level				9331.53		
Type of Cement (API Class) in first (lead) or only slurry				A:50:50		
In second slurry				A:50:50		
In third slurry				NA		
Sacks of Cement Used in first (lead) or only slurry				300		
In second slurry				175		
In third slurry				NA		
Vol of slurry pumped (Cu ft)(14X15) in first (lead) or only slurry				1491		
In second slurry				224		
In third slurry				NA		
Calculated Annular Height of Cement behind Pipe (ft)				9331.53		
Cement left in pipe (ft)				88		

*Amount of Surface Casing Required (from Form 1000) **1500** ft.

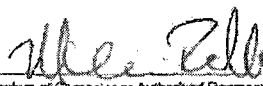
*Was cement circulated to Ground Surface? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*Was Cement Bond Log run? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth? ft


CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

* Designates items to be completed by Operator.

Remarks			
Lead Slurry:	300	Sacks	
300 Sacks 50/50 Class A/POZ, 8% Gel, 8% Gypsum, 2% SMS, 12% SFA, 0.25 lbs Poly Flake			
Tail Slurry:	175	Sacks	
175 Sacks 50/50 Class A/POZ, 2% Gel, 2% Gypsum, 0.4% SFL-2, 0.25% SR-2, 0.25 lbs Polyflake			

Remarks

CEMENTING COMPANY
I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.
 Signature of Cementer or Authorized Representative

OPERATOR
I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.
 Signature of Operator or Authorized Representative

Name & Title (Printed on PL-102)	
Mike Ratio, Service Supervisor	
Company Name	
Spinnaker Oilfield Services LLC	
Address	
3675 Alfordale	
City	
El Reno	
State	Zip
OK	73036
Telephone (Area) Number	
1-405-265-2804	
Date	
October 14, 2017	

Name & Title (Printed on PL-102)	
Suzie Crump Regulatory Tech	
Company Name	
Marathon Oil Company	
Address	
7301 N.W. Expressway	
Oklahoma City	
State	Zip
OK	73132
Telephone (Area) Number	
(405) 728-5205	
Date	
2/1/18	

INSTRUCTIONS

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- Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.

API No.
35-017-25062

OCC/OCC Operator No.
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CEMENTING REPORT
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Oil & Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000
OAC 165:10-3-4(h)

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TYPE OR USE BLACK INK ONLY

*Field Name		OCC District
*Operator Marathon Oil		OCC/OCC Operator No. 01363
*Well Name/No. Betty Crowley 1107 1-2MH		County Canadian County, OK
*Location SW 1/4 SE 1/4 SW 1/4 E 1/4	Sec 2	Top 11N Rge 7W

Cement Casing Date	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date						10/18/2017
*Size of Drill Bit (inches)						6 1/8
*Estimated % wash or hole enlargement used in calculations						40
*Size of Casing (inches O.D.)						4 1/2
*Top of Liner (if liner used) (ft.)						9180.87
*Setting Depth of Casing (ft.) from ground level						14842
Type of Cement (API Class) in first (lead) or only slurry						A50:50
In second slurry						NA
In third slurry						NA
Sacks of Cement Used in first (lead) or only slurry						485
In second slurry						NA
In third slurry						NA
Vol of slurry pumped (Cu ft)(14X15.) in first (lead) or only slurry						795.4
In second slurry						NA
In third slurry						NA
Calculated Annular Height of Cement behind Pipe (ft)						5506
Cement left in pipe (ft)						52

*Amount of Surface Casing Required (from Form 1000) **1500** ft.

*Was cement circulated to Ground Surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*Was Cement Bond Log run?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth?	ft

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

* Designates items to be completed by Operator.
Items not so designated shall be completed by the Cementing Company.

Remarks			
Lead Slurry:	485	Sacks	
485 Sacks 50/50 Class H/POZ, 5% Gyp, 5% Gel, 0.3% SA-2, 0.5% SFL-2, 0.25 lbs/sk Poly Flake			
Tail Slurry:	#REF!	Sacks	
#REF!			

Remarks

CEMENTING COMPANY

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Mike Rallo

Signature of Cementer or Authorized Representative

OPERATOR

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Suzie Crump

Signature of Operator or Authorized Representative

Section 1: Name, Address or Type

Mike Rallo, Service Supervisor

Spinnaker Oilfield Services LLC

Address:

3675 Akadale

City:

El Reno

State:

OK

Zip:

73038

Telephone (AC) Number:

1-405-265-2804

Date:

October 18, 2017

Section 1: Name, Address or Type

Suzie Crump - Reg Technician

Marathon Oil Company

7301 N.W. Expressway

Oklahoma City

Oklahoma 73132

(405) 728-5205

2/1/18

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