

Oklahoma Corporation Commission
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000
Rule 165: 10-3-25

Form 1002A

API No.: 35083230900002

Completion Report

Spud Date: April 25, 2009

OTC Prod. Unit No.: 083-126143

Drilling Finished Date: May 07, 2009

1st Prod Date: June 14, 2009

Amended

Completion Date: June 05, 2009

Amend Reason: CHANGE WELL NAME

Drill Type: STRAIGHT HOLE

Well Name: LOGAN COUNTY (CORAL 11-33) 11-33

Purchaser/Measurer:

Location: LOGAN 11 17N 3W
C S2 NE NW
660 FSL 2235 FWL of 1/4 SEC
Derrick Elevation: 1095 Ground Elevation: 1085

First Sales Date:

Operator: FULLSPIKE ENERGY LLC 23833
PO BOX 482
1861 BROWN BLVD STE 631 (ARLINGTON)
BOYD, TX 76023-0482

Completion Type		Location Exception		Increased Density	
X	Single Zone	Order No		Order No	
	Multiple Zone	There are no Location Exception records to display.		564038	
	Commingled				

Casing and Cement								
Type		Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE		8 5/8	24	L-5	485	500	260	SURFACE
PRODUCTION		5 1/2	15.5	J-55	6120	1200	230	5400

Liner								
Type	Size	Weight	Grade	Length	PSI	SAX	Top Depth	Bottom Depth
There are no Liner records to display.								

Total Depth: 6284

Packer		Plug	
Depth	Brand & Type	Depth	Plug Type
There are no Packer records to display.		5943	CIBP

Initial Test Data										
Test Date	Formation	Oil BBL/Day	Oil-Gravity (API)	Gas MCF/Day	Gas-Oil Ratio Cu FT/BBL	Water BBL/Day	Pumpin or Flowing	Initial Shut-In Pressure	Choke Size	Flow Tubing Pressure
Jul 23, 2009	MISSISSIPPI LIME	17	39	70	4117	13	PUMPING			

Completion and Test Data by Producing Formation			
Formation Name: MISSISSIPPI LIME		Code: 351MSSLM	Class: OIL
Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
108200	80	5619	5721
Acid Volumes		Fracture Treatments	
2,000 GALLONS 15%		5,130 BARRELS	

Formation	Top
OSWEGO	5367
MISSISSIPPI LIME	5618
HUNTON	5800
VIOLA DOLOMITE	5999
1ST WILCOX	6153
2ND WILCOX	6247

Were open hole logs run? Yes
Date last log run: May 07, 2009

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY	
Status: Accepted	1139150

API NO. 083-23 090
OTC PROD. UNIT NO. 083-126143

PLEASE TYPE OR USE BLACK INK ONLY
NOTE:

Attach copy of original 1002A if recompletion or reentry.

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000
Rule 165:10-3-25

RECEIVED

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OKLAHOMA CORPORATION COMMISSION

Form 1002A
Rev. 2009

☐ ORIGINAL
☒ AMENDED (Reason)

Change Well Name

COMPLETION REPORT

TYPE OF DRILLING OPERATION

☒ STRAIGHT HOLE ☐ DIRECTIONAL HOLE ☐ HORIZONTAL HOLE
☐ SERVICE WELL

If directional or horizontal, see reverse for bottom hole location.

COUNTY	LOGAN	SEC	11	TWP	17N	RGE	3 W
LEASE NAME	Logan County			WELL NO.	11-33		
ELEVATION	1095	Ground	1085	FSL OF 1/4 SEC	1650	1/4 SEC	2235
OPERATOR NAME	Full Spike			OTC/OCC OPERATOR NO.	23833		
ADDRESS	1861 Brown Blvd.						
CITY	Arlington		STATE	TX	ZIP	76006	

COMPLETION TYPE

<input checked="" type="checkbox"/> SINGLE ZONE
<input type="checkbox"/> MULTIPLE ZONE
Application Date
COMMINGLED
Application Date
LOCATION EXCEPTION
ORDER NO.
INCREASED DENSITY
ORDER NO.

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	8 5/8	24	L5	485	500	260	SURFACE
INTERMEDIATE							
PRODUCTION	5 1/2	15.5	J-55	6120	1200	230	5400
LINER							

PACKER @ _____ BRAND & TYPE _____ PLUG @ 5943 TYPE CIBP PLUG @ _____ TYPE _____ TOTAL DEPTH 6,284
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION 351MSSLM

FORMATION	Mississippilime						
SPACING & SPACING ORDER NUMBER	80/108200						
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	oil						
PERFORATED INTERVALS	5619-5721						
ACID/VOLUME	15% 2000 gals						
FRACTURE TREATMENT (Fluids/Prop Amounts)	Yes						
	5130 BBLs						

Min Gas Allowable (165:10-17-7)

Gas Purchaser/Measurer

OR
Oil Allowable (165:10-13-3)

First Sales Date

INITIAL TEST DATA

INITIAL TEST DATE	7/23/2009						
OIL-BBL/DAY	17						
OIL-GRAVITY (API)	39						
GAS-MCF/DAY	70						
GAS-OIL RATIO CU FT/BBL	4117						
WATER-BBL/DAY	13						
PUMPING OR FLOWING	pumping						
INITIAL SHUT-IN PRESSURE							
CHOKE SIZE							
FLOW TUBING PRESSURE							

AS SUBMITTED

A record of the formations drilled through, and pertinent remarks are presented on the reverse. I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct, and complete to the best of my knowledge and belief.

Becky Marcum SIGNATURE Becky Marcum NAME (PRINT OR TYPE) 3-1-2010 940-452-8188 DATE PHONE NUMBER
P.O. Box 982 ADDRESS Bay TX 76023 CITY STATE ZIP bluecreek75@yahoo.com EMAIL ADDRESS

PLEASE TYPE OR USE BLACK INK ONLY

FORMATION RECORD

Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

LEASE NAME _____

WELL NO. _____

NAMES OF FORMATIONS	TOP
OSWEGO	5,367
MISSISSIPPI LIME	5618
HUNTON	5,800
VIOLA DOLOMITE	5,999
1ST WILCOX	6,153
2ND WILCOX	6,247

FOR COMMISSION USE ONLY	
ITD on file <input type="checkbox"/> YES <input type="checkbox"/> NO	
APPROVED _____	DISAPPROVED _____
2) Reject Codes	

Were open hole logs run?	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
Date Last log was run	5/7/2009	
Was CO ₂ encountered?	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no at what depths? _____
Was H ₂ S encountered?	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no at what depths? _____
Were unusual drilling circumstances encountered?	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no
If yes, briefly explain below:		

Other remarks:

640 Acres

If more than three drainholes are proposed, attach a separate sheet indicating the necessary information.

Direction must be stated in degrees azimuth. Please note, the horizontal drainhole and its end point must be located within the boundaries of the lease or spacing unit.

Directional surveys are required for all drainholes and directional wells.

640 Acres

BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

SEC	TWP	RGE	COUNTY
Spot Location		1/4	1/4
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line:

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)

LATERAL #1

SEC	TWP	RGE	COUNTY
Spot Location		1/4	1/4
Depth of Deviation		Radius of Turn	Direction
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line:

LATERAL #2

SEC	TWP	RGE	COUNTY
Spot Location		1/4	1/4
Depth of Deviation		Radius of Turn	Direction
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line:

LATERAL #3

SEC	TWP	RGE	COUNTY
Spot Location		1/4	1/4
Depth of Deviation		Radius of Turn	Direction
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line: