

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.: 35083237970002

Completion Report

Spud Date: February 12, 2006

OTC Prod. Unit No.:

Drilling Finished Date: February 26, 2006

Amended

1st Prod Date: June 08, 2006

Amend Reason: CHANGE WELL NAME

Completion Date: May 02, 2006

Drill Type: STRAIGHT HOLE

Well Name: LOGAN COUNTY (CORAL 2-24 AND BENNIE RAY 1) 2-24

Purchaser/Measurer:

Location: LOGAN 2 17N 3W
E2 NW NE SE
2310 FSL 1940 FWL of 1/4 SEC
Derrick Elevation: 1013 Ground Elevation: 1002

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	525048		525047	
	Commingled				

Casing and Cement								
Type		Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE		8 5/8	23	L-5	365	500	250	SURFACE
PRODUCTION		5 1/2	15.5	J-55	5943	1500	200	5110

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

Total Depth: 6145

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

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
Jun 12, 2006	MISSISSIPPI LIME	50	38	110	2200	20	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
61403	80	5514	5662
Acid Volumes		Fracture Treatments	
2,000 GALLONS 15%		4,991 BARRELS	

Formation	Top
OSWEGO	5238
MISSISSIPPI	5512
WOODFORD	5668
HUNTON	5750
VIOLA	5920
1ST WILCOX	6030
2ND WILCOX	6104

Were open hole logs run? Yes
Date last log run: February 26, 2006

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY	
Status: Accepted	1139141

RECEIVED

MAR 15 2018

OKLAHOMA CORPORATION COMMISSION

Form 1002A
Rev. 2009

API NO. 083-23797
OTC PROD. UNIT NO. 083-113685

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

☐ 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	2	TWP	17N	RGE	3 W
LEASE NAME	Logan County			WELL NO.	2-24		
NW 1/4 NE 1/4 SE 1/4				FSL OF 1/4 SEC	2310	FWL 1/4 SEC	1940
ELEVATION	1013	Ground	1002	Latitude (if known)	Longitude (if known)		
OPERATOR NAME	Full Spike			OTC/OCC OPERATOR NO.	23833		
ADDRESS	1861 Brown Blvd.						
CITY	Arlington	STATE	TX	ZIP	76006		

640 Acres

LOCATE WELL

COMPLETION TYPE

<input checked="" type="checkbox"/> SINGLE ZONE
<input type="checkbox"/> MULTIPLE ZONE
Application Date
COMINGLED
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	23	L-5	365	500	250	SURFACE
INTERMEDIATE							
PRODUCTION	5 1/2	15.5	J-55	5943	1500	200	5110
LINER							

PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____ TOTAL DEPTH 6,145
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION

351 MESSLM

FORMATION	Mississippi Lime						
SPACING & SPACING ORDER NUMBER	80/61403						
CLASS Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	OIL						
PERFORATED INTERVALS	5514-5596						
	5638-5662						
ACID/VOLUME	15% 2000 GALS						
FRACTURE TREATMENT (Fluids/Prop Amounts)	YES						
	4991 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	6/12/2006						
OIL-BBL/DAY	50						
OIL-GRAVITY (API)	38						
GAS-MCF/DAY	110						
GAS-OIL RATIO CU FT/BBL	2200						
WATER-BBL/DAY	20						
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.

Boyd SIGNATURE *Boyd* NAME (PRINT OR TYPE) 3-1-2018 DATE 940 452-8164 PHONE NUMBER
P.O. Box 402 ADDRESS Boyd 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	5,238
MISSISSIPPI	5,512
WOODFORD	5668
HUNTON	5,750
VIOLA	5,920
1st WILCOX	6,030
2nd WILCOX	6,104

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	2/26/2006
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	1/4
Measured Total Depth	True Vertical Depth		BHL From Lease, Unit, or Property Line:
Feet From 1/4 Sec Lines	FSL	FWL	

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)

LATERAL #1

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

LATERAL #2

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

LATERAL #3

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