

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.: 35083236860001

Completion Report

Spud Date: December 15, 2003

OTC Prod. Unit No.: 083-112178

Drilling Finished Date: January 01, 2004

1st Prod Date: February 01, 2004

Amended

Completion Date: January 20, 2004

Amend Reason: CHANGE WELL NAME

Drill Type: STRAIGHT HOLE

Well Name: LOGAN COUNTY (CORAL 2-3) 2-3

Purchaser/Measurer:

Location: LOGAN 2 17N 3W
NE SW NE SW
1690 FSL 1870 FWL of 1/4 SEC
Derrick Elevation: 1002 Ground Elevation: 989

First Sales Date:

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

Completion Type	
X	Single Zone
	Multiple Zone
	Commingled

Location Exception	
Order No	
There are no Location Exception records to display.	

Increased Density	
Order No	
484498	

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE	8 5/8	23	H-40	319	500	240	SURFACE
PRODUCTION	5 1/2	15.5	J-55	6182	1500	350	4925

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

Total Depth: 6429

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

Plug	
Depth	Plug Type
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
Apr 23, 2004	MISSISSIPPI LIME	60	41	175	2933	90	PUMPING	160		

Completion and Test Data by Producing Formation

Formation Name: MISSISSIPPI LIME

Code: 351MSSLM

Class: OIL

Spacing Orders

Order No	Unit Size
61403	80

Perforated Intervals

From	To
5502	5672

Acid Volumes

2,500 GALLONS HCL

Fracture Treatments

4,285 BARRELS

Formation	Top
OSWEGO	5260
MISSISSIPPI	5505
HUNTON	5760
VIOLA	5900

Were open hole logs run? No

Date last log run:

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks

There are no Other Remarks.

FOR COMMISSION USE ONLY

1139158

Status: Accepted

RECEIVED

Form 1002A Rev. 2009

API NO. 083-23686
OTC PROD UNIT NO. 083-112178

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

MAR 15 2018

OKLAHOMA CORPORATION COMMISSION

ORIGINAL
 AMENDED (Reason) Change Well Name

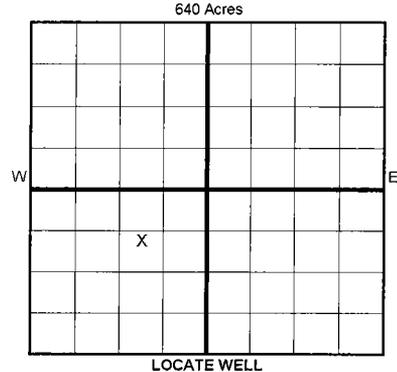
COMPLETION REPORT

TYPE OF DRILLING OPERATION
 STRAIGHT HOLE DIRECTIONAL HOLE HORIZONTAL HOLE
 SERVICE WELL
If directional or horizontal, see reverse for bottom hole location.

SPUD DATE 12/15/2003
DRLG FINISHED DATE 1/1/2004
DATE OF WELL COMPLETION 1/20/2004
1st PROD DATE 2/01/2004
RECOMP DATE

COUNTY LOGAN SEC 2 TWP 17N RGE 3 W
LEASE NAME Logan County WELL NO. 2-3
NE 1/4 SW 1/4 NE 1/4 SW 1/4 FSL OF 1/4 SEC 1690 FWH 1/4 SEC 1870
ELEVATION Derrick FL 1002 Ground 989 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



COMPLETION TYPE

<input checked="" type="checkbox"/>	SINGLE ZONE
<input type="checkbox"/>	MULTIPLE ZONE Application Date
<input type="checkbox"/>	COMMINGLED Application Date
<input type="checkbox"/>	LOCATION EXCEPTION ORDER NO.
<input type="checkbox"/>	INCREASED DENSITY ORDER NO. 484498

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	8 5/8	23	H-40	319	500	240	SURFACE
INTERMEDIATE							
PRODUCTION	5 1/2	15.5	J-55	6182	1500	350	4925
LINER							

PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____ TOTAL DEPTH 6,429
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION 351 Mes LM

FORMATION	SPACING & SPACING ORDER NUMBER	CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	PERFORATED INTERVALS	ACID/VOLUME	FRACTURE TREATMENT (Fluids/Prop Amounts)
Mississippi Lime	80/61403	OIL	5502-5512 5524-5600 5642-5672	2500 GALS HCL HCL	YES 4285 BBLs

Min Gas Allowable (165:10-17-7) OR Gas Purchaser/Measurer
 Oil Allowable (165:10-13-3) First Sales Date _____

INITIAL TEST DATA

INITIAL TEST DATE	4/23/2004
OIL-BBL/DAY	60
OIL-GRAVITY (API)	41
GAS-MCF/DAY	175
GAS-OIL RATIO CU FT/BBL	2933
WATER-BBL/DAY	90
PUMPING OR FLOWING	pumping
INITIAL SHUT-IN PRESSURE	160 psi
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.

[Signature] SIGNATURE Billy Madam NAME (PRINT OR TYPE) 3/1/2018 940-52-8284 DATE PHONE NUMBER
P.O. Box 483 ADDRESS Ray CITY TX 76023 STATE ZIP bluecrack75@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	5,260
MISSISSIPPI	5,505
HUNTON	5760
VIOLA	5,900

FOR COMMISSION USE ONLY

ITD on file YES NO

APPROVED _____ DISAPPROVED _____

2) Reject Codes _____

Were open hole logs run? _____ yes no

Date Last log was run _____

Was CO₂ encountered? _____ yes no at what depths? _____

Was H₂S encountered? _____ yes no at what depths? _____

Were unusual drilling circumstances encountered? _____ yes 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	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	1/4
Depth of Deviation		Radius of Turn	Direction
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line:
Feet From 1/4 Sec Lines		FSL	FWL
		Total Length	

LATERAL #2

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

LATERAL #3

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