

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.: 35019140620002

Completion Report

Spud Date: August 18, 1949

OTC Prod. Unit No.: 019-01836

Drilling Finished Date: August 23, 1949

Amended

1st Prod Date: August 30, 1949

Amend Reason: CORRECT LOCATION FOOTAGES AND WELL SPOT

Completion Date: August 30, 1949

Recomplete Date: April 19, 2007

Drill Type: STRAIGHT HOLE

Well Name: COLINE B (COLINE OIL CO 8B) 8

Purchaser/Measurer:

Location: CARTER 21 3S 2W
SW SW NE SE
1433 FSL 1605 FWL of 1/4 SEC
Derrick Elevation: 1022 Ground Elevation: 1015

First Sales Date:

Operator: CHATHAM VICKIE R 17284

4938 OIL CITY RD
WILSON, OK 73463-6510

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

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
PRODUCTION	5 1/2	14	J-55	952		75	

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

Total Depth: 965

Packer		Plug	
Depth	Brand & Type	Depth	Plug Type
901	BAKER TENSION	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 19, 2007	PONTOTOC	1	24			15	PUMPING			

Completion and Test Data by Producing Formation

Formation Name: PONTOTOC		Code: 419PNTC	Class: OIL
Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
UNSPACED		938	965
Acid Volumes		Fracture Treatments	
NONE		NONE	

Formation	Top
SEE ORIGINAL	0

Were open hole logs run? Yes
Date last log run: August 23, 1949

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
WELL SPOT AND FOOTAGES CORRECTED

FOR COMMISSION USE ONLY	
Status: Accepted	1138585

RECEIVED

Form 1002A
Rev. 2009

JAN 16 2018

OKLAHOMA CORPORATION
COMMISSION

API NO. 019-14062
OTC PROD. 019
UNIT NO. 01836

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

COMPLETION REPORT

☐ ORIGINAL
☒ AMENDED (Reason)

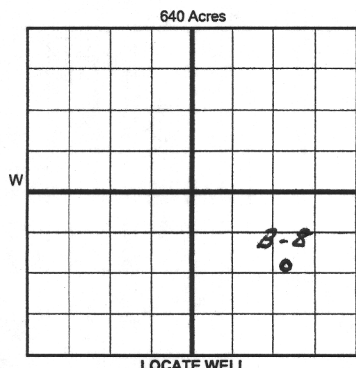
CORRECT LOC FOOTAGES
+ Well spot

TYPE OF DRILLING OPERATION

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

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

COUNTY	<u>CARTER</u>	SEC	<u>21</u>	TWP	<u>35</u>	RGE	<u>2W</u>	SPUD DATE	<u>8/18/49</u>
LEASE NAME	<u>COLINE 'B'</u>			WELL NO.	<u>8</u>			DRLG FINISHED DATE	<u>8/23/49</u>
SW 1/4	<u>SW 1/4 NE 1/4 SE 1/4</u>	FSL OF 1/4 SEC	<u>1433</u>	FWL OF 1/4 SEC	<u>1605</u>			DATE OF WELL COMPLETION	<u>8/30/49</u>
ELEVATION N Derrick	<u>1022</u>	Ground	<u>1015</u>	Latitude (if known)				1st PROD DATE	<u>8/30/49</u>
OPERATOR NAME	<u>VICKIE R. CHATHAM</u>			OTC/OCC OPERATOR NO.	<u>17284-0</u>				
ADDRESS	<u>RT. 1 BOX 481</u>								
CITY	<u>WILSON</u>	STATE	<u>OK.</u>	ZIP	<u>73463</u>				



COMPLETION TYPE

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

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE							
INTERMEDIATE							
PRODUCTION	<u>5 1/2</u>	<u>14#</u>	<u>J-55</u>	<u>952'</u>		<u>75</u>	
LINER							

PACKER @ 901 BRAND & TYPE BAKER TENSION PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

TOTAL DEPTH 965

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	<u>PONTOTOC</u>						
SPACING & SPACING ORDER NUMBER	<u>US</u>						
CLASS: Oil, Gas, Dry, Inj., Disp, Comm Disp, Svc	<u>OIL</u>						
PERFORATED INTERVALS	<u>938-65</u>						
ACID/VOLUME	<u>NONE</u>						
FRACTURE TREATMENT (Fluids/Prop Amounts)	<u>NONE</u>						

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

Gas Purchaser/Measurer

☐ OR

First Sales Date

INITIAL TEST DATA

Oil Allowable (165:10-13-3)

INITIAL TEST DATE	<u>4/19/07</u>						
OIL-BBL/DAY	<u>1</u>						
OIL-GRAVITY (API)	<u>24</u>						
GAS-MCF/DAY	<u>TSTM</u>						
GAS-OIL RATIO CU FT/BBL							
WATER-BBL/DAY	<u>15</u>						
PUMPING OR FLOWING	<u>PUMPING</u>						
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.

JOHN R. LAWS JOHN R. LAWS 1/10/18 580-220-8455
SIGNATURE NAME (PRINT OR TYPE) DATE PHONE NUMBER
1515 WARD RD. AROMORE, OK. 73401 JRLAWS@HOTMAIL.COM
ADDRESS CITY STATE ZIP 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.

NAMES OF FORMATIONS	TOP
SEE ORIGINAL	

LEASE NAME COLINE 'B' WELL NO. 8

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	<u>8/23/49</u>
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:

WELL SPOT & FOOTAGES CORRECTED

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:

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:

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:

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: