

APPLICATION TO DRILL, RECOMPLETE OR REENTER

FORM 1000
REV. 2014

FILE ORIGINAL ONLY

PLEASE TYPE OR USE BLACK INK

1. OTC/OCC OPERATOR NUMBER

23897-0

2. API NUMBER

OKLAHOMA CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
JIM THORPE BUILDING
P.O. BOX 52000
OKLAHOMA CITY, OK 73152-2000
(RULE 165:10-3-1)

BATCH NUMBER (OCC USE ONLY)

WALK THROUGH

3. NOTICE OF INTENT TO:

(CHECK ONLY ONE)

☒ DRILL ☐ RECOMPLETE ☐ REENTER ☐ DEEPEN ☒ AMEND - REASON

NOTE: ATTACH COPY OF 1002-A IF RECOMPLETION OR REENTRY.

4. TYPE OF DRILLING OPERATION >>>>>>>

(NOTE: If directional or horizontal, see reverse side for bottom hole location)

A. ☐ STRAIGHT HOLE ☐ DIRECTIONAL HOLE ☒ HORIZONTAL HOLEB. ☒ OIL/GAS ☐ INJECTION ☐ DISPOSAL ☐ WATER SUPPLY ☐ STRAT TEST ☐ SERVICE WELL6. LOCATE WELL AND OUTLINE
LEASE OR SPACING UNIT IN INK.

5. WELL LOCATION:

SECTION 8 TOWNSHIP 12N RANGE 06W COUNTY CANADIAN

SPOT LOCATION: NE 1/2 NE 1/2 NE 1/4 NE 1/4 FEET FROM QUARTER from NORTH LINE from EAST LINE
SECTION LINES: 288 351

7. Well will be 100 feet from nearest unit or property boundary.

8. LEASE NAME: BONZAI 1206 WELL NUMBER: 8-1MH

9. NAME OF OPERATOR: 89 ENERGY EMAIL ADDRESS: wayne.smith@tresmanagement.com

ADDRESS 105 N. HUDSON, SUITE 650 PHONE (AC/NUMBER) 405-606-7191

CITY OKLAHOMA CITY STATE OK ZIP CODE 73102

10. SURFACE OWNER (ONE ONLY, ATTACH SHEET FOR ADDITIONAL OWNERS)

Ranas Farms, LLC

ADDRESS 5012 Turtle Lake Ct.

CITY Oklahoma City STATE OK ZIP CODE 73165

14. LIST TARGET FORMATIONS AND DEPTHS OF EACH BELOW (LIMITED TO TEN)

1)	Meramec 8,670'	6)
2)		7)
3)		8)
4)		9)
5)		10)

15. SPACING ORDER NUMBER(S) AND SIZE UNIT(S):

669056

16. PENDING APPLICATION C.D. NO.

17. LOCATION EXCEPTION ORDER NO.
20170450218. INCREASED DENSITY ORDER NO.
201701462

19. TOTAL DEPTH 14500	20. GROUND ELEV. 1282	21. BASE OF TREATABLE WATER 490	22. SURFACE CASING 600	23. ALT CASING PROG USED? Y X N
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24. ALTERNATIVE CASING PROCEDURE, check box and fill in blank (AFFIDAVIT REQUIRED, see reverse side, line 31.)

A. Cement will be circulated from total depth to ground surface on the production casing string.
 B. Cement will be circulated from _____ depth to _____ depth by use of a two stage cementing tool.

25.1. PIT INFORMATION: Using more than one pit or mud system? Y X N If yes, fill out line 25.2 on top reverse side.

A. TYPE OF MUD SYSTEM: X WATER BASED OIL BASED GAS BASED (AIR DRILL)
 B. EXPECTED MUD CHLORIDE CONTENT: maximum: 5000 ppm; average: 3000 ppm.

PIT #1 C. TYPE OF PIT SYSTEM: on-site off-site X closed If off-site, specify location: X Y N

D. IS DEPTH TO TOP OF GROUND WATER GREATER THAN 10 FT BELOW BASE OF PIT? X Y N

E. WITHIN 1 MILE OF MUNICIPAL WATER WELL? X Y N

F. WELLHEAD PROTECTION AREA? Y X N

Off-Site Pit No. _____

26.1 OCC USE ONLY	A. CATEGORY 1A 1B 2 3 4 C	B. PIT LOCATION: Alluvial Plain Terrace Deposit	C. Special area or field rule?	D. DEEP SCA? Y N	E. CBL required? Y N	F. SOIL COMPACTED LINER REQUIRED? Y N	G. 20 mil GEOMEMBRANE LINER REQUIRED? Y N
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27. PROPOSED METHOD FOR DISPOSAL OF DRILLING FLUIDS (MUST BE COMPLETED)

A. Evaporation/dewater and backfilling of reserve pit.

B. Public Landfill: Location

C. Annular Injection (REQUIRES PERMIT and surface casing set 200 feet below base of treatable water-bearing formation.)

PERMIT NO. _____

D. One time land application (REQUIRES PERMIT)

PERMIT NO. 17-33185

E. Haul to Commercial pit facility; Specify site:

Order No. _____

F. Haul to Commercial soil farming facility; Specify site:

Order No. _____

G. Haul to recycling/re-use facility; Specify site:

Order No. _____

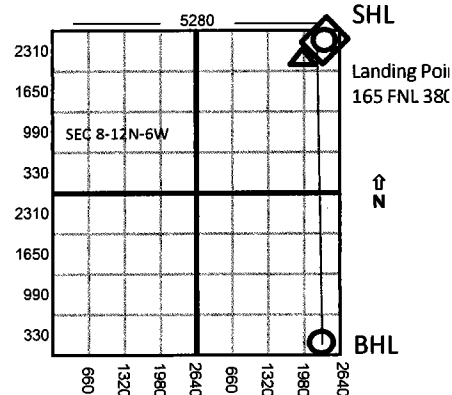
H. Other, Specify: _____

I hereby certify I am authorized to submit this two page application prepared by me or under my supervision.

The facts and proposals made herein are true, correct and complete to the best of my knowledge and belief.

SIGNATURE 	NAME (Print or Type) Wayne Smith	PHONE (AC/NO.) 405-842-7888	FAX 405-842-7885	DATE 11/27/2017
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NOTICE: Approval is void if operations have not commenced within six months of the date of approval. An approved permit must be posted at the location during drilling and completion operations.
 File the Form 1001A, Spud Report, within fourteen days of commencement of operations.



8

TOWNSHIP
BONZAI 1206RANGE
8-1MH

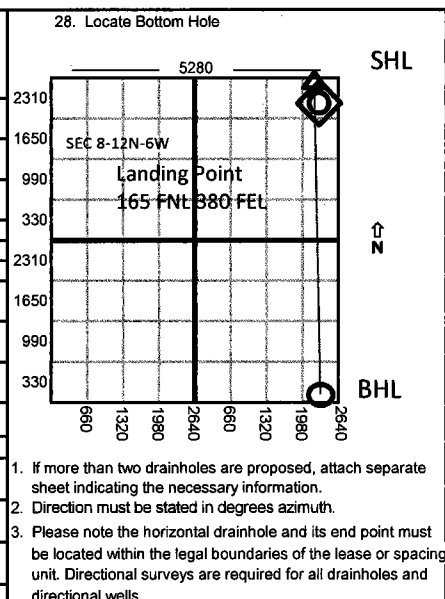
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NOTIFY DISTRICT OFFICE 24 HOURS PRIOR TO CEMENTING SURFACE CASING.

25.2. PIT INFORMATION:

A. TYPE OF MUD SYSTEM: WATER BASED X OIL BASED GAS BASED (AIR DRILL)
 B. EXPECTED MUD CHLORIDE CONTENT: maximum: 5000 ppm; average: 3000 ppm.
 PIT #2 C. TYPE OF PIT SYSTEM: on-site off-site X closed If off-site, specify location:
 D. IS DEPTH TO TOP OF GROUND WATER GREATER THAN 10 FT BELOW BASE OF PIT? X Y N
 E. WITHIN 1 MILE OF MUNICIPAL WATER WELL? X Y N
 F. WELLHEAD PROTECTION AREA? Y X N Off-Site Pit No.

26.2 OCC USE ONLY		A. CATEGORY		1A	1B	2	3	4	C	Fm:	
B. PIT LOCATION:		<u> </u> Alluvial Plain <u> </u> Terrace Deposit <u> </u> Bedrock Aquifer <u> </u> Other H.S.A. <u> </u> Non-H.S.A.									
C. Special area or field rule?		<u> </u> Y <u> </u> N		D. DEEP SCA?		<u> Y </u> <u> </u> N		E. CBL?		<u> Y </u> <u> </u> N	
F. SOIL COMPACTED LINER REQUIRED?		<u> Y </u> <u> </u> N		G. 20 mil GEOMEMBRANE LINER REQUIRED		<u> Y </u> <u> </u> N					
29 Bottom Hole Location for Directional Hole:		SEC	TWP	RGE	COUNTY						
SPOT LOCATION:		1/2	1/2	1/4	1/4	FEET FROM QUARTER		from NORTH LINE		from EAST LINE	
Measured Total Depth		True Vertical Depth		BHL from nearest Lease, Unit, Or Property Line:							
30. Bottom Hole Location for Horizontal Hole: (LATERALS)											
LATERAL #1:		SEC	8	TWP	12N	RGE	6W	COUNTY		Canadian	
SPOT LOCATION:		NE	1/2	NE	1/2	NE	1/4	NE	1/4		
Depth of Deviation		Radius of Turn		Direction		Total Length					
8242		900		180		5010					
Measured Total Depth		14500		True Vertical Depth		8815		End Point location from nearest lease, unit or property line:		100	
LATERAL #2:		SEC	TWP	RGE	COUNTY						
SPOT LOCATION:		1/4	1/4	1/4	1/4	FEET FROM QUARTER		from SOUTH LINE		from WEST LINE	
Depth of Deviation		Radius of Turn		Direction		Total Length					
Measured Total Depth		True Vertical Depth		End Point location from nearest lease, unit or property line:							
LATERAL #3:		SEC	TWP	RGE	COUNTY						
SPOT LOCATION:		1/4	1/4	1/4	1/4	FEET FROM QUARTER		from SOUTH LINE		from WEST LINE	
Depth of Deviation		Radius of Turn		Direction		Total Length					
Measured Total Depth		True Vertical Depth		End Point location from nearest lease, unit or property line:							



31. AFFIDAVIT FOR ALTERNATIVE CASING PROGRAM

(Signature on front of this form attests to this affidavit)

1. This well WILL WILL NOT penetrate any known lost circulation zones.
2. During the drilling of this well, withdrawals from any water well within 1/4 mile WILL WILL NOT exceed 50 gallons per minute.
3. The projected depth of the well IS IS NOT less than 100 feet from the top of any enhanced recovery project or gas storage facility.
4. List the following for all water wells within 1/4 mile of this well. (Information concerning some water wells may be obtained from the OKLAHOMA WATER RESOURCES BOARD, 3800 N. Classen Blvd., Oklahoma City, OK 73118). IF NO WATER WELLS FOUND, SO STATE. (ATTACH ADDITIONAL SHEET IF NECESSARY)

Name of Owner/Operator	Address of Owner/Operator	Location (Nearest 1/4 1/4 1/4 1/4)	Depth of Well
N/A			

5. A cement bond log is required to be run and submitted from not less than 100 feet below the base of the treatable water-bearing formation to the surface. **OCC USE ONLY**
6. If casing depth is more than 250 feet deeper than base of the treatable water-bearing formation, operator must submit a letter of request listing reasons and precautions to be taken.

INTENT TO DRILL CHECKLIST

APPROVED 30 REJECTED

OCC USE ONLY

1. SURETY 8/29/19
 A. NONE filed.
 B. EXPIRED: Date
 C. OUTSTANDING CONTEMPT ORDER.

OCC USE ONLY

4. GEOLOGY

DO NOT WRITE INSIDE THIS BOX

OKLAHOMA CORPORATION
 RECEIPT 180525003
 Date: 11/27/2017 Time: 10:39
 Case: 000000000 Cashier: CRS
 Payor: TRES MANAGEMENT
 Check: 048518 \$500.00
 45 Emergency Walk Thru ITD

TYPE OR USE BLACK INK
SEE REVERSE FOR INSTRUCTIONS

OKLAHOMA CORPORATION COMMISSION
Oil and Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000

Form 1003/1003C
Rev 2016

API NO 35-017-25080
OTC PROD. UNIT NO.
PLUGGING DATE 11/24/17

PLUGGING RECORD
OAC 155.10-11-7

(PLEASE SEE INSTRUCTIONS ON BACK PAGE)

Well Name/No BONZAI 1206 8-1MH
Location NE 1/4 NE 1/4 NE 1/4 NE 1/4 Sec 8 Twp 12N Rge 6W
2352 Ft FSL of 1/4 Sec 2329 Ft FWL of 1/4 Sec County CANADIAN
Total Depth 8391 Base of Treatable Water 490 Well Classification Dry

Locate Well on Grid

OPERATOR
Name 89 ENERGY OTC/OCC No. 23897
Address 105 N. Hudson Suite 650 Phone 405-606-7191
City Oklahoma City State OK Zip 73102

PIPE RECORD

Size	Run (ft)	Pulled (ft)	Conductor
9 5/8	628	- 0 -	Surface
			IC
			IC
			P.C.
			Lnr.

PERFORATION DEPTHS

Set	From	To
Set 1		
Set 2		
Set 3		
Set 3		

Plug	Type of Plug	Hole Size or Pipe Size	Depth	No Sacks Cement	Slurry Volume	Calculated TOC	Measured Top of Plug If Tagged
1	CEMENT	8 3/4 - 9 5/8	795'	305	62BBL	0'	252'
2							
3							
4							
5							

REMARKS
Lost downhole tools - hole collapse during drilling
Reason for Plugging

CEMENTER CERTIFICATION
I certify that the cement plugs were placed in this well as shown on this report, per OCC instructions. The cementing was performed by me or under my direct supervision. I certify that all cementing data is true, correct and complete.
Signature Tyler Melton Date 11/24/17 Name and Title Typed or Printed Tyler Melton Field Supervisor
Company Name O-Tex Pumping Permit No.
Address 37044 East County Road 1690 Phone 580-665-1957
City Wynnewood State OK Zip 73098

OPERATOR CERTIFICATION
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 herein, and that data and facts presented are true, correct, and complete to the best of my knowledge. This covers all well data and information presented herein.
Signature Joe Tennison Date Name and Title Typed or Printed

CORPORATION COMMISSION USE ONLY
By signing this form, the District Manager has approved the contents thereof as to form only. Said District Manager does not warrant the facts provided by the operator are true or that the operator has properly plugged the described well.
Signature of District Manager Field Inspector

API NUMBER: 017 25080

OKLAHOMA CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
P.O. BOX 52000
OKLAHOMA CITY, OK 73152-2000
(Rule 165:10-3-1)

Approval Date: 10/03/2017
Expiration Date: 04/03/2018

Horizontal Hole Oil & Gas

PERMIT TO DRILL

WELL LOCATION: Sec: 08 Twp: 12N Rge: 6W

County: CANADIAN

SPOT LOCATION: ☐ NE ☐ NE ☐ NE ☐ NE FEET FROM QUARTER: FROM NORTH FROM EAST

SECTION LINES: 288 311

Lease Name: BONZAI 1206

Well No: 8-1WH

Well will be 288 feet from nearest unit or lease boundary.

Operator Name: 89 ENERGY LLC

Telephone: 4056006040

OTC/OCC Number: 23897 0

89 ENERGY LLC
105 N HUDSON AVE STE 650
OKLAHOMA CITY, OK 73102-4832

RANAS FARMS LLC
5012 TURTLE LAKE CT
OKLAHOMA CITY OK 73165

Formation(s) (Permit Valid for Listed Formations Only):

Name	Depth	Name	Depth
1 WOODFORD	9030	6	
2		7	
3		8	
4		9	
5		10	

Spacing Orders: No Spacing

Location Exception Orders:

Increased Density Orders:

Pending CD Numbers: 201701462

Special Orders:

Total Depth: 14500

Ground Elevation: 1282

Surface Casing: 600

Depth to base of Treatable Water-Bearing FM: 490

Under Federal Jurisdiction: No

Fresh Water Supply Well Drilled: No

Surface Water used to Drill: No

PIT 1 INFORMATION

Type of Pit System: CLOSED Closed System Means Steel Pits

Type of Mud System: WATER BASED

Chlorides Max: 5000 Average: 3000

Is depth to top of ground water greater than 10ft below base of pit? Y

Within 1 mile of municipal water well? Y

Wellhead Protection Area? Y

Pit is located in a Hydrologically Sensitive Area.

Category of Pit: C

Liner not required for Category: C

Pit Location is ALLUVIAL

Pit Location Formation: ALLUVIUM

Approved Method for disposal of Drilling Fluids:

D. One time land application -- (REQUIRES PERMIT)

PERMIT NO: 17-33185

H. SEE MEMO

This permit does not address the right of entry or settlement of surface damages.

The duration of this permit is SIX MONTHS, except as otherwise provided by Rule 165: 10-3-1.

Rule 165: 10-3-4 (c) (7) (e) - The Operator shall give 24 Hours notice by telephone to the appropriate District Office of the Conservation Division as to when Surface Casing will be run.

PIT 2 INFORMATION

Type of Pit System: CLOSED Closed System Means Steel Pits

Type of Mud System: OIL BASED

Chlorides Max: 300000 Average: 200000

Is depth to top of ground water greater than 10ft below base of pit? Y

Within 1 mile of municipal water well? Y

Wellhead Protection Area? Y

Pit is located in a Hydrologically Sensitive Area.

Category of Pit: C

Liner not required for Category: C

Pit Location is ALLUVIAL

Pit Location Formation: ALLUVIUM

HORIZONTAL HOLE 1

Sec 08 Twp 12N Rge 6W County CANADIAN

Spot Location of End Point: SW SE SE SE

Feet From: SOUTH 1/4 Section Line: 100

Feet From: EAST 1/4 Section Line: 380

Depth of Deviation: 8460

Radius of Turn: 646

Direction: 181

Total Length: 5025

Measured Total Depth: 14500

True Vertical Depth: 9030

End Point Location from Lease,

Unit, or Property Line: 100

Notes:

Category

Description

COMPLETION INTERVAL

10/3/2017 - G64 - WOODFORD COMPLETION INTERVAL WILL BE GREATER THAN 165' FNL & FSL, 330' FEL & FWL PER STAKING PLAT

HYDRAULIC FRACTURING

9/20/2017 - G71 - OCC 165:10-3-10 REQUIRES:

1) PRIOR TO COMMENCEMENT OF HYDRAULIC FRACTURING OPERATIONS FOR HORIZONTAL WELLS, NOTICE GIVEN FIVE BUSINESS DAYS IN ADVANCE TO OFFSET OPERATORS WITH WELLS COMPLETED IN THE SAME COMMON SOURCE OF SUPPLY WITHIN 1/2 MILE;

2) WITH NOTICE ALSO GIVEN 48 HOURS IN ADVANCE OF HYDRAULIC FRACTURING ALL WELLS TO BOTH THE OCC CENTRAL OFFICE AND LOCAL DISTRICT OFFICES, USING THE "FRAC NOTICE FORM" FOUND AT THE FOLLOWING LINK: OCCEWEB.COM/OG/OGFORMS.HTML; AND,

3) THE CHEMICAL DISCLOSURE OF HYDRAULIC FRACTURING INGREDIENTS FOR ALL WELLS TO BE REPORTED TO FRACFOCUS WITHIN 60 DAYS AFTER THE CONCLUSION THE HYDRAULIC FRACTURING OPERATIONS, USING THE FOLLOWING LINK: FRACFOCUS.ORG

MEMO

9/20/2017 - G71 - PITS 1 & 2 - CLOSED SYSTEM=STEEL PITS (REQUIRED - NORTH CANADIAN RIVER), PIT 2 - OBM RETURNED TO VENDOR, CUTTINGS PERMITTED PER DISTRICT

PENDING CD - 201701462

10/3/2017 - G64 - (640)(HOR) 8-12N-6W
EST WDFD, OTHER
COMPL. INT. NCT 165' FNL & FSL, NCT 330' FEL & FWL
REC. 9-8-2017 (P. PORTER)

PUBLIC WATER SUPPLY WELL

9/20/2017 - G71 - CANADIAN CO RWD #4 - 1 PWS/WPA, SE/4 5-12N-6W

This permit does not address the right of entry or settlement of surface damages.

The duration of this permit is SIX MONTHS, except as otherwise provided by Rule 165: 10-3-1.

Rule 165: 10-3-4 (c) (7) (e) - The Operator shall give 24 Hours notice by telephone to the appropriate District Office of the Conservation Division as to when Surface Casing will be run.

017 25080 BONZAI 1206 8-1WH