

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.: 35111275020000

Completion Report

Spud Date: May 13, 2016

OTC Prod. Unit No.:

Drilling Finished Date: August 10, 2016

1st Prod Date:

Completion Date: August 10, 2016

Drill Type: STRAIGHT HOLE

Well Name: DUNCAN 2-A

Purchaser/Measurer:

Location: OKMULGEE 5 14N 15E
SE SW SE SW
245 FSL 1975 FWL of 1/4 SEC
Derrick Elevation: 0 Ground Elevation: 645

First Sales Date:

Operator: SHANKS ROBERT "BOB" 3065

22780 GRIMES RD
HASKELL, OK 74436-8809

| Completion Type | | Location Exception | | Increased Density | |
|-----------------|---------------|-----------------------------------------------------|--|----------------------------------------------------|--|
| | 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 |
| CONDUCTOR | 7 | 20 | LS | 28 | | | |

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

Total Depth: 840

| 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 |
| There are no Initial Data records to display. | | | | | | | | | | |
| Completion and Test Data by Producing Formation | | | | | | | | | | |

| | | |
|----------------------|-------|------------|
| Formation Name: NONE | Code: | Class: DRY |
|----------------------|-------|------------|

| Formation | Top |
|---------------|-----|
| PEACH ORCHARD | 305 |
| BARTLESVILLE | 840 |

Were open hole logs run? No

Date last log run:

Were unusual drilling circumstances encountered? No

Explanation:

| |
|--------------------------------------------------|
| Other Remarks |
| OCC - PER OPERATOR, NO CASING CEMENTED IN PLACE. |

| | |
|-------------------------|---------|
| FOR COMMISSION USE ONLY | |
| Status: Accepted | 1139610 |

RECEIVED

Form 1002A
Rev. 2009

JUN 18 2018

OKLAHOMA CORPORATION
COMMISSION

API
NO. 111-27502
OTC PROD.
UNIT NO.

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) _____

TYPE OF DRILLING OPERATION

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

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

| | | | | |
|------------------------------------------|-----------------------------------|-----------------------------------|----------------------------------------|--------------------------|
| COUNTY <u>Okmulgee</u> | SEC <u>5</u> | TWP <u>14N</u> | RGE <u>15E</u> | SPUD DATE <u>5-13-16</u> |
| LEASE NAME <u>Duncan</u> | WELL NO. <u>2-A</u> | DRLG FINISHED DATE <u>8-10-16</u> | | |
| <u>S 1/4 SW 1/4 SE 1/4 SW 1/4</u> | FSL OF 1/4 SEC <u>245</u> | FWL OF 1/4 SEC <u>1925</u> | DATE OF WELL COMPLETION <u>8-10-16</u> | |
| ELEVATION N Derrick <u>645</u> | Latitude (if known) | Longitude (if known) | | |
| OPERATOR NAME <u>Robert "Bob" Shanks</u> | OTC/OCC OPERATOR NO. <u>3065-</u> | 1st PROD DATE | | |
| ADDRESS <u>22780 Grimes Rd</u> | | | | |
| CITY <u>Haskell</u> | STATE <u>OK</u> | ZIP <u>74436</u> | | |

640 Acres

| | | | | | | | |
|--|--|--|--|--|--|--|--|
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LOCATE WELL

COMPLETION TYPE

| |
|----------------------------------------|
| <input 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 | <u>7</u> | <u>20#</u> | <u>15</u> | <u>28</u> | | | |
| SURFACE | | | | | | | |
| INTERMEDIATE | | | | | | | |
| PRODUCTION | | | | | | | |
| LINER | | | | | | | |
| TOTAL DEPTH | | | | | | | <u>840</u> |

PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION

| | | | | | | |
|-------------------------------------------------|------------|--|--|--|--|--|
| FORMATION | | | | | | |
| SPACING & SPACING ORDER NUMBER | | | | | | |
| CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc | <u>Dry</u> | | | | | |
| PERFORATED INTERVALS | | | | | | |
| ACID/VOLUME | | | | | | |
| FRACTURE TREATMENT (Fluids/Prop Amounts) | | | | | | |

☐ 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 | | | | | | |
| OIL-BBL/DAY | <u>0</u> | | | | | |
| OIL-GRAVITY (API) | | | | | | |
| GAS-MCF/DAY | | | | | | |
| GAS-OIL RATIO CU FT/BBL | | | | | | |
| WATER-BBL/DAY | <u>0</u> | | | | | |
| PUMPING OR FLOWING | | | | | | |
| INITIAL SHUT-IN PRESSURE | | | | | | |
| CHOKE SIZE | | | | | | |
| FLOW TUBING PRESSURE | | | | | | |

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 <u>Roger A. Shanks</u> | NAME (PRINT OR TYPE) <u>Roger A. Shanks</u> | DATE <u>6-12-18</u> | PHONE NUMBER <u>918-7525478</u> |
| ADDRESS <u>22780 Grimes Rd. Haskell</u> | | CITY <u>OK</u> | STATE <u>74436</u> |
| ZIP <u>74436</u> | | EMAIL ADDRESS | |

AS SUBMITTED

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 |
|---------------------|-----|
| Peach Orchard | 305 |
| Bartlesville | 840 |

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

Other remarks:

OCC - Per Operator no casing cemented in place

640 Acres

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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

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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 | Total Length |
| | | 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 | Total Length |
| | | 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 | Total Length |
| | | BHL From Lease, Unit, or Property Line: | |