

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.: 35083238680001

Completion Report

Spud Date: December 21, 2007

OTC Prod. Unit No.: 083-118636

Drilling Finished Date: January 04, 2008

1st Prod Date: February 22, 2008

Amended

Completion Date: February 06, 2008

Amend Reason: CHANGE WELL NAME

Drill Type: STRAIGHT HOLE

Well Name: LOGAN COUNTY (CORAL 2-28) 2-28

Purchaser/Measurer:

Location: LOGAN 2 17N 3W
SE SW NW SW
1434 FSL 575 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	547562		547561	
	Commingled				

Casing and Cement								
Type		Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE		8 5/8	24	J-55	337	500	200	SURFACE
PRODUCTION		5 1/2	15.5	J-55	6127	1259	240	5050

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

Total Depth: 6153

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
Mar 01, 2008	MISSISSIPPI LIME	22	38	35	1591	42	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	5566	5646
Acid Volumes		Fracture Treatments	
2,000 GALLONS 15%		4,535	

Formation	Top
BIG LIME	5189
OSWEGO	5296
MISSISSIPPI	5566
WOODFORD	5718
HUNTON	5800
VIOLA	5944
1ST WILCOX	6074
2ND WILCOX	6140

Were open hole logs run? Yes
Date last log run: January 13, 2008

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY	
Status: Accepted	1139147

API NO. 083-23868
OTC PROD. UNIT NO. 083-118636

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

RECEIVED

MAR 15 2018

OKLAHOMA CORPORATION
COMMISSION

Form 1002A
Rev. 2009

☐ 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.	2-28	
SE 1/4 SW 1/4 NW 1/4 SW 1/4	FSL OF 1/4 SEC		1434	FWL 1/4 SEC		575	DATE OF WELL COMPLETION	2/06/2008	
ELEVATION Derrick FL	1013	Ground	1002	Latitude (if known)			Longitude (if known)	1st PROD DATE	2/22/2008
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	547562
ORDER NO.	
INCREASED DENSITY	547561
ORDER NO.	

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	8 5/8	24	J-55	337	500	200	SURFACE
INTERMEDIATE							
PRODUCTION	5 1/2	15.5	J-55	6127	1259	240	5050
LINER							

PACKER @ _____ BRAND & TYPE _____

PLUG @ _____ TYPE _____

PLUG @ _____ TYPE _____

TOTAL DEPTH 6,153

PACKER @ _____ BRAND & TYPE _____

PLUG @ _____ TYPE _____

PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION

351MSSLM

FORMATION	Mississippi Lime						
SPACING & SPACING ORDER NUMBER	80/61403						
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	OIL						
PERFORATED INTERVALS	5566-5600						
	5606-5620						
	5634-5646						
ACID/VOLUME	15% 2000 GALS						
FRACTURE TREATMENT (Fluids/Prop Amounts)	YES						
	4535						

Min Gas Allowable

(165:10-17-7)

Gas Purchaser/Measurer



OR

First Sales Date

Oil Allowable

(165:10-13-3)

INITIAL TEST DATA

INITIAL TEST DATE	3/1/2008						
OIL-BBL/DAY	22						
OIL-GRAVITY (API)	38						
GAS-MCF/DAY	35						
GAS-OIL RATIO CU FT/BBL	1591						
WATER-BBL/DAY	42						
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.

Billy Marcum
SIGNATURE

Billy Marcum
NAME (PRINT OR TYPE)

3-1-2008 940-452-8284
DATE PHONE NUMBER

PO Box 482
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
BIG LIME	5,189
OSWEGO	5,296
MISSISSIPPI	5566
WOODFORD	5,718
HUNTON	5,800
VIOLA	5,944
1st WILCOX	6,074
2nd WILCOX	6,140

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	1/13/2008	
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	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
			Total Length
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
			Total Length
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
			Total Length
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line: