

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.: 35083236730002

Completion Report

Spud Date: September 02, 2003

OTC Prod. Unit No.: 083-112178

Drilling Finished Date: September 16, 2003

Amended

1st Prod Date: October 20, 2003

Amend Reason: CHANGE WELL NAME

Completion Date: October 20, 2003

Drill Type: STRAIGHT HOLE

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

Purchaser/Measurer:

Location: LOGAN 2 17N 3W
W2 SE SE SW
330 FSL 2135 FWL of 1/4 SEC
Derrick Elevation: 971 Ground Elevation: 960

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
486811

Increased Density
Order No
There are no Increased Density records to display.

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE	8 5/8	23	L-5	330	500	230	SURFACE
PRODUCTION	5 1/2	15.5	J-55	6388	1700	326	5100

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

Total Depth: 6400

Packer	
Depth	Brand & Type
5412	BAKER MODEL R

Plug	
Depth	Plug Type
5692	CIBP

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
Sep 27, 2003	1ST WILCOX					90	SWAB			
Sep 30, 2003	VIOLA DOLOMITE	3				30	SWAB			
Oct 30, 2003	MISSISSIPPI LIME	200	38	350	1750	55	PUMPING	900	14/64	540

Completion and Test Data by Producing Formation

Formation Name: 1ST WILCOX

Code: 202WLCX1

Class: DRY

Spacing Orders

Order No	Unit Size
477381	40

Perforated Intervals

From	To
6010	6011

Acid Volumes

150 GALLONS 7 1/2%

Fracture Treatments

There are no Fracture Treatments records to display.

Formation Name: VIOLA DOLOMITE

Code: 202VIODO

Class: DRY

Spacing Orders

Order No	Unit Size
77381	80

Perforated Intervals

From	To
5884	5945

Acid Volumes

5,000 GALLONS 15%

Fracture Treatments

There are no Fracture Treatments records to display.

Formation Name: MISSISSIPPI LIME

Code: 351MSSLM

Class: OIL

Spacing Orders

Order No	Unit Size
61403	80

Perforated Intervals

From	To
5498	5640

Acid Volumes

2,000 GALLONS 15%

Fracture Treatments

5,230 BARRELS

Formation	Top
OSWEGO	5234
MISSISSIPPI	5494
WOODFORD	5650
HUNTON	5736
VIOLA	5882
1ST WILCOX	6010
2ND WILCOX	6090

Were open hole logs run? Yes

Date last log run:

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks

There are no Other Remarks.

FOR COMMISSION USE ONLY

1139120

Status: Accepted

API NO. 083-23673X
OTC PROD. 083-112178
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

COMPLETION REPORT

RECEIVED

MAR 15 2018

OKLAHOMA CORPORATION
COMMISSION

Form 1002A
Rev. 2009

☐ ORIGINAL
☒ AMENDED (Reason)

Change Well Name

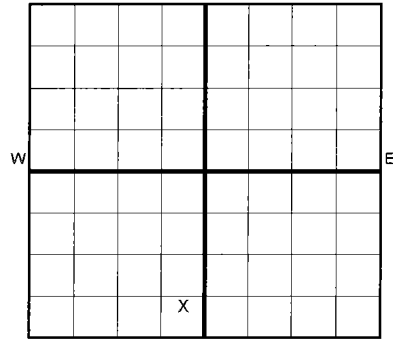
TYPE OF DRILLING OPERATION

☒ STRAIGHT HOLE ☐ DIRECTIONAL HOLE ☐ HORIZONTAL HOLE

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	2-2		
W2 1/4 SE 1/4 SE 1/4 SW 1/4	FSL OF 1/4 SEC	330	FWL 1/4 SEC	2135	DATE OF WELL COMPLETION	10/20/2003	
ELEVATION Derrick FL	971	Ground	960	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	

640 Acres



COMPLETION TYPE

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

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	8 5/8	23	L-5	330	500	230	SURFACE
INTERMEDIATE							
PRODUCTION	5 1/2	15.5	J-55	6388	1700	326	5100
LINER							

PACKER @ 5,412	BRAND & TYPE Baker Mod R	PLUG @ 5692	TYPE CIBP	PLUG @	TYPE	TOTAL DEPTH	6,400
PACKER @	BRAND & TYPE	PLUG @	TYPE	PLUG @	TYPE		

COMPLETION & TEST DATA BY PRODUCING FORMATION 202WLCXI, 202V10DD, 351M95LM

FORMATION	1st Wilcox	Viola Dolomite	Mississippi Lime
SPACING & SPACING ORDER NUMBER	40/477381	80/77381	80/61403
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	DRY	below plug or Dry	Oil
PERFORATED INTERVALS	6010-6011	5884-5945	5498-5548
			5570-5582
			5614-5640
ACID/VOLUME	7 1/2% 150 GALS	15% 5000 GALS	15% 2000 GALS
			Yes
FRACTURE TREATMENT (Fluids/Prop Amounts)			5230 Bbls

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

Gas Purchaser/Measurer

First Sales Date

INITIAL TEST DATA

INITIAL TEST DATE	9/27/2003	9/30/2003	10/30/2003
OIL-BBL/DAY	Trace	3	200
OIL-GRAVITY (API)			38
GAS-MCF/DAY	Trace		350
GAS-OIL RATIO CU FT/BBL			1750
WATER-BBL/DAY	90	30	55
PUMPING OR FLOWING	Swab	Swab	Pumping
INITIAL SHUT-IN PRESSURE			900
CHOKE SIZE			14/64
FLOW TUBING PRESSURE			540

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	NAME (PRINT OR TYPE)	DATE	PHONE NUMBER
P.O. Box 482	TX 76033	3/1/2018	940-452-8284
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
OSWEGO	5,234
MISSISSIPPI	5,494
Woodford	5650
Hunton	5,736
VIOLA	5,882
1st WILCOX	6,010
2nd WILCOX	6,090

LEASE NAME _____ WELL NO. _____

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	_____
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
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: