API NUMBER: 019 24251 A

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

| Approval Date:   | 05/03/2021 |  |
|------------------|------------|--|
| Expiration Date: | 11/03/2022 |  |

Straight Hole Oil & Gas

## **PERMIT TO RE-ENTER**

| WELL LOCATION:                      | Section:            | 12          | Township:    | 2S Rar             | nge: 3 | 3W                                 | County:  | CAR    | RTER      |                |            |            |          |              |                |             |              |
|-------------------------------------|---------------------|-------------|--------------|--------------------|--------|------------------------------------|--|--------|-----------|----------------|------------|------------|----------|--------------|----------------|-------------|--------------|
| SPOT LOCATION:                      | W2 NE               | SE          | NE           | FEET FROM QUAR     | RTER:  | FROM                               | NORTH  | FR     | OM        | EAST           |            |            |          |              |                |             |              |
|                                     |                     |             |              | SECTION L          | INES:  |                                    | 1650   |        |           | 37             |            |            |          |              |                |             |              |
| Lease Name:                         | SW WILDCAT          | JIM DEES    | E UNIT       |                    | v      | Vell No:                           | 13-1   |        |           |                | Well       | will be    | 537      | feet from    | n nearest unit | or lease    | e boundary.  |
| O                                   | MACK ENERGY         | v 00        |              |                    |        |                                    |  |        |           |                |            |            |          |              |                |             | •            |
| Operator Name:                      | MACK ENERG          | 1 60        |              |                    | lele   | ephone:                            | 5802525  | 580;   | 58025     | 25580          |            |            |          | Old          | C/OCC Num      | iber:       | 11739 0      |
| MACK ENER                           | GY CO               |             |              |                    |        |                                    |  | ] [    | ROE       | BERT D & F     | FRANCE     | SAY        | ELTO     | N            |                |             |              |
| 4700 GAILLA                         | RDIA PKWY           | STE 10      | 2            |                    |        |                                    |  |        | 467       | SAMEDA         | NRD        |            |          |              |                |             |              |
|                                     |                     | 012 10      |              | 72442 4020         |        |                                    |  |        |           |                |            |            |          | 011          |                |             |              |
| OKLAHOMA                            | CITY,               |             | OK           | 73142-1839         | ,      |                                    |  |        | RAT       | LIFF CITY      |            |            |          | OK           | 73481          |             |              |
|                                     |                     |             |              |                    |        |                                    |  |        |           |                |            |            |          |              |                |             |              |
|                                     |                     |             |              |                    |        |                                    |  | J      |           |                |            |            |          |              |                |             |              |
| Formation(s)                        | (Permit Vali        | d for Lis   | ted For      | mations Only       | ):     |                                    |  |        |           |                |            |            |          |              |                |             |              |
| Name                                | •                   |             | Code         |                    |        | epth                               |  | 1      |           |                |            |            |          |              |                |             |              |
| 1 DEESE                             |                     |             | 404DE        | EESS               |        | 349                                |  |        |           |                |            |            |          |              |                |             |              |
| Spacing Orders:                     | 701901              |             |              |                    | ocatio | n Evcor                            | otion Orde   | re.    | No Exc    | eptions        |            |            | In       | creased De   | ensity Orders: | No De       | nsity Orders |
|                                     |                     |             |              | _                  | ocanc  | JII LACC                           | olion Orde   | 13.    |           | <u> </u>       |            |            |          |              |                |             |              |
| Pending CD Number                   | ers: No Pendin      | g           |              |                    | Wo     | rking int                          | erest own  | ers' n | notified: | ***            |            |            |          | Sp           | ecial Orders:  | No Spe      | ecial Orders |
| Total Depth: 4                      | 400                 | Ground Ele  | evation: 9   | 00                 | S.I.   | face (                             | Casing:  | 12     | )60       |                |            | Denth t    | n hase   | of Treatable | e Water-Beari  | na FM:      | 1210         |
| Total Deptil. 4                     | 400                 | Giodila Lie | evalion. 9   | 00                 | Sui    | iace                               | Jasiliy.   | 12     | .00       |                |            | Борит      | o base   | or rreatable | o water beam   | . ig i ivi. | 1210         |
| Under                               | Federal Jurisdicti  | on: No      |              |                    |        |                                    |  | [      | Appro     | ved Method fo  | or disposa | l of Drill | ing Flui | ds:          |                |             |              |
| Fresh Water Supply Well Drilled: No |                     |             |              |                    |        |                                    | D. One time land application (REQUIRES PERMIT) PERMI |        |           |                |            |            | MIT NO:  | 20-37387     |                |             |              |
| Surface                             | e Water used to D   | rill: Yes   |              |                    |        |                                    |  | L      |           |                |            |            |          |              |                |             |              |
| PIT 1 INFOR                         | MATION              |             |              |                    |        |                                    |  |        |           | Catego         | ry of Pit: | 2          |          |              |                |             |              |
| Type of Pit System: ON SITE         |                     |             |              |                    |        | Liner not required for Category: 2 |  |        |           |                |            |            |          |              |                |             |              |
| Type of Mud System: WATER BASED     |                     |             |              |                    |        | Pit Location is: BED AQUIFER       |  |        |           |                |            |            |          |              |                |             |              |
| Chlorides Max: 50                   | •                   |             |              |                    |        |                                    |  |        | Pi        | t Location For | rmation:   | WELLIN     | IGTON    |              |                |             |              |
| 1                                   | top of ground wat   | •           |              | pelow base of pit? | Y      |                                    |  |        |           |                |            |            |          |              |                |             |              |
| Within 1 r                          | mile of municipal v |             |              |                    |        |                                    |  |        |           |                |            |            |          |              |                |             |              |
|                                     | Wellhead Protec     |             |              |                    |        |                                    |  |        |           |                |            |            |          |              |                |             |              |
| Pit <u>is</u> lo                    | ocated in a Hydrol  | ogically Se | ensitive Are | ea.                |        |                                    |  |        |           |                |            |            |          |              |                |             |              |

NOTES:

| Category             | Description  |
|----------------------|--|
| HYDRAULIC FRACTURING | [12/1/2020 - GC2] - OCC 165:10-3-10 REQUIRES:  |
|                      | 1) NOTICE SHALL BE GIVEN AT LEAST 5 BUSINESS DAYS PRIOR TO COMMENCEMENT OF HYDRAULIC FRACTURING OPERATIONS ON A HORIZONTAL WELL TO OPERATORS PRODUCING WELLS WITHIN 1 MILE OF THE COMPLETION INTERVAL OF THE SUBJECT WELL. THE NOTICE TO SUCH OPERATORS SHALL CONTAIN THE INFORMATION IN FORM 6000NOO. IF THE HYDRAULIC FRACTURING OPERATIONS SCHEDULE CHANGES AFTER NOTICE HAS BEEN PROVIDED, RESULTING IN A DELAY OF OPERATIONS OF MORE THAN 5 DAYS FROM THE INITIAL NOTICE, NEW NOTICE IS REQUIRED TO BE GIVEN; |
|                      | 2) NOTICE WILL BE GIVEN TO THE OCC CENTRAL OFFICE AND LOCAL DISTRICT OFFICES AT LEAST 48 HOURS PRIOR TO COMMENCEMENT OF HYDRAULIC FRACTURING OPERATIONS. FORM 6000NHF SHALL BE USED AND IS FOUND AT THIS LINK: OCCEWEB.COM/OG/OGFORMS.HTML; AND,   |
|                      | 3) THE CHEMICAL DISCLOSURE OF HYDRAULIC FRACTURING INGREDIENTS FOR ALL WELLS IS TO BE REPORTED TO FRACFOCUS WITHIN 60 DAYS AFTER THE CONCLUSION OF HYDRAULIC FRACTURING OPERATIONS, FOUND AT FRACFOCUS.ORG   |
| SPACING - 701901     | [12/1/2020 - GC2] - (UNIT) SE NE 12-2S-3W EST SW WILDCAT JIM DEESE OPERATING UNIT FOR THE DEESS  |