API NUMBER: 037 29513

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

| Approval Date:   | 08/22/2023 |
|------------------|------------|
| Expiration Date: | 02/22/2025 |

Straight Hole Injection

## **PERMIT TO DRILL**

| WELL LOCATION:  | Section:           | 28 To          | ownship:   | 15N       | Range  | 9E                                       | County: (  | CREE        | K               |               |              |         |                        |            |             |
|---|--------------------|----------------|------------|-----------|--|--|--|-------------|-----------------|---------------|--------------|---------|------------------------|------------|-------------|
| SPOT LOCATION:  | NW                 | NW             | SW         | FEET FR   | ROM QUARTER  | FROM                                     | NORTH  | FRO         | WEST            |               |              |         |                        |            |             |
|   |                    |                |            | s         | SECTION LINES  |  | 150  |             | 150             |               |              |         |                        |            |             |
| Lease Name:   | BACON              |                |            |           |  | Well No:                                 | : WI WELL  | -           |                 | Wel           | l will be    | 150     | feet from nearest ur   | it or leas | e boundary. |
| Operator Name:  | WFD OIL COR        | PORATION       |            |           | ī  | elephone                                 | : 4057153°                                       | 130         |                 |               |              |         | OTC/OCC Nu             | mber:      | 17501 0     |
| WFD OIL CORPORATION                                     |                    |                |            |           |  |  | KATHY ELAII                                      | NE BACC     | N REV           | OCAE          | BLE TRUST    |         |                        |            |             |
|   |                    |                |            |           |  |  |  |             | PO BOX 1117     | 7             |              |         |                        |            |             |
| EDMOND,   |                    |                | ОК         | 73012     | -0619  |  |  |             | BRISTOW         |               |              |         | OK 73012               |            |             |
| ,   |                    |                |            |           |  |  |  |             | BICIOTOTT       |               |              |         | OK 75012               |            |             |
|   |                    |                |            |           |  |  |  | ] -         |                 |               |              |         |                        |            |             |
|   |                    |                |            |           |  |  |  |             |                 |               |              |         |                        |            |             |
| Formation(s)  | (Permit Vali       | d for Liste    | ed Forr    | nations   | Only):   |  |  |             |                 |               |              |         |                        |            |             |
| Name  |                    |                | Code       |           |  | Depth                                    |  |             |                 |               |              |         |                        |            |             |
| 1 SKINNER   |                    |                | 404SK      | NR        |  | 2350                                     |  |             |                 |               |              |         |                        |            |             |
| Spacing Orders:   | No Spacin          | g              |            |           | Loca   | tion Exce                                | ption Order                                      | s: <b> </b> | No Exception    | ons           |              | Inc     | creased Density Orders | No -       | Density     |
| Pending CD Numbers: No Pending Working interest owne    |                    |                |            |           | rs' no   | notified: DNA Special Orders: No Special |  |             |                 |               |              | Special |                        |            |             |
| Total Depth: 2400 Ground Elevation: 877 Surface Casing: |                    |                |            |           |  | 440                                      | Depth to base of Treatable Water-Bearing FM: 390 |             |                 |               |              |         |                        |            |             |
| Under   | Federal Jurisdicti | on: No         |            |           |  |  |  | 7           | Approved Method | l for disposa | al of Drilli | ng Flui | ds:                    |            |             |
| Fresh Water Supply Well Drilled: No                     |                    |                |            | 1         | A. Evaporation/dewater and backfilling of reserve pit. |  |  |             |                 |               |              |         |                        |            |             |
| Surface   | Water used to D    | rill: No       |            |           |  |  |  |             |                 |               |              |         |                        |            |             |
| PIT 1 INFORI  | MATION             |                |            |           |  |  |  |             | Cate            | gory 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                                       | 00 Average: 300    | 0              |            |           |  |  |  |             | Pit Location F  | ormation:     | barnsdal     | I       |                        |            |             |
| Is depth to   | top of ground wat  | ter greater th | nan 10ft b | elow base | e of pit? Y  |  |  |             |                 |               |              |         |                        |            |             |
| Within 1 n  | nile of municipal  | water well?    | N          |           |  |  |  |             |                 |               |              |         |                        |            |             |
|   | Wellhead Protect   | ction Area?    | N          |           |  |  |  |             |                 |               |              |         |                        |            |             |
| Pit <u>is</u> lo  | cated in a Hydrol  | ogically Sen   | sitive Are | a.        |  |  |  |             |                 |               |              |         |                        |            |             |
|   |                    |                |            |           |  |  |  |             |                 |               |              |         |                        |            |             |

NOTES:

| Category             | Description  |
|----------------------|--|
| HYDRAULIC FRACTURING | [8/22/2023 - GE7] - 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 FRACTURING OPERATIONS. FORM 6000NHF SHALL BE FOUND HERE: HTTPS://OKLAHOMA.GOV/OCC/DIVISIONS/OIL-GAS/OGCD-FORMS; 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              | [8/22/2023 - GE7] - N/A - INJECTION WELL   |