

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.: 35137038440002

Completion Report

Spud Date: July 19, 1947

OTC Prod. Unit No.:

Drilling Finished Date: October 06, 1947

Amended

1st Prod Date: October 14, 1947

Amend Reason: RETURN TO PRODUCTION

Completion Date: November 15, 1947

Recomplete Date: October 14, 2019

Drill Type: STRAIGHT HOLE

Well Name: VESS 189

Purchaser/Measurer:

Location: STEPHENS 25 1S 5W
C NW NE NE
2310 FSL 1650 FWL of 1/4 SEC
Derrick Elevation: 1076 Ground Elevation: 0

First Sales Date:

Operator: STEPHENS & JOHNSON OPERATING CO 19113
PO BOX 2249
811 6TH ST STE 300
WICHITA FALLS, TX 76307-2249

Completion Type		Location Exception		Increased Density	
X	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
SURFACE	10.75	40.5	H-40	245		250	SURFACE
PRODUCTION	7.00	23	J-55	5672		850	3340

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

Total Depth: 5877

Packer	
Depth	Brand & Type
There are no Packer records to display.	

Plug	
Depth	Plug Type
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
Oct 15, 2019	SIMS	10	28			350	PUMPING			

Completion and Test Data by Producing Formation			
Formation Name: SIMS		Code: 401SIMS	Class: OIL
Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
There are no Spacing Order records to display.		5310	5574
Acid Volumes		Fracture Treatments	
There are no Acid Volume records to display.		There are no Fracture Treatments records to display.	

Formation	Top
SPRINGER	5210

Were open hole logs run? No
Date last log run:

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
FILING 1002A - TO GET WELL OFF 1003A LIST. WELL IS ACTIVE. FILED PER PHILIP FISHER, OCC FIELD REPRESENTATIVE

FOR COMMISSION USE ONLY	
Status: Accepted	1146752

137-03844-02

API NO. **35-137-03844**
 OTC PROD. **1**
 UNIT NO.

Oil and Gas Conservation Division
 P.O. Box 52000
 Oklahoma City, OK 73152-2000
 405-521-2331
 OCCCentralProcessing@OCC.OK.GOV



OKLAHOMA
 Corporation
 Commission

RECEIVED

Form 1002A

Rev. 2020

AUG 2 2021

☒ ORIGINAL
☐ AMENDED (Reason)

RETURN TO PRODUCTION (RTP)

Rule 165:10-3-25

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 **STEPHENS** SEC **25** TWP **1S** RGE **5W** DATE OF WELL COMPLETION **11-15-1947**
 LEASE NAME **VESS** WELL NO. **189** 1st PROD DATE **RTP 10/14/19**
 C **1/4 NW 1/4 NE 1/4 NE 1/4** FSL **2310** FWL **1650** RECOMP DATE **10-14-2019**
 ELEVATION Derrick FL **1076** Ground Latitude Longitude
 OPERATOR NAME **STEPHENS & JOHNSON OPER. CO.** OTC / OCC OPERATOR NO. **19113**
 ADDRESS **P.O. Box 2249**
 CITY **WICHITA FALLS** STATE **TX** ZIP **76307**

Per original 1002A
 OKLAHOMA CORPORATION COMMISSION
 LOCATE WELL

COMPLETION TYPE

☒ SINGLE ZONE
☐ MULTIPLE ZONE
☐ COMMINGLED
 LOCATION EXCEPTION ORDER NO.
 MULTIUNIT ORDER NO.
 INCREASED DENSITY ORDER NO.

CASING & CEMENT (Attach Form 1002C)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	10.75	40.5	H40	245		250	SURF
INTERMEDIATE							
PRODUCTION	7.00	23	J55	5672		850	3340
LINER							

PACKER @ _____ BRAND & TYPE _____

PLUG @ _____ TYPE _____

PLUG @ _____ TYPE _____

TOTAL DEPTH **5877**

PACKER @ _____ BRAND & TYPE _____

PLUG @ _____ TYPE _____

PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION **4015 SIMS**

FORMATION	SIMS					
SPACING & SPACING ORDER NUMBER						
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	OIL					
PERFORATED INTERVALS	5310-5574					
ACID/VOLUME						
FRACTURE TREATMENT (Fluids/Prop Amounts)						

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

OR

Oil Allowable (165:10-13-3)

Purchaser/Measurer

First Sales Date

INITIAL TEST DATA

INITIAL TEST DATE	10/15/19				
OIL-BBL/DAY	10.0				
OIL-GRAVITY (API)	28				
GAS-MCF/DAY	0				
GAS-OIL RATIO CU FT/BBL					
WATER-BBL/DAY	350				
PUMPING OR FLOWING	P				
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.

Bruce Robertson **BRUCE ROBERTSON** **7/28/21** **940-723-2166**
 SIGNATURE NAME (PRINT OR TYPE) DATE PHONE NUMBER
P.O. Box 2249 **WICHITA FALLS, TX 76307** **BROBERTSON@SIOC.NET**
 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.

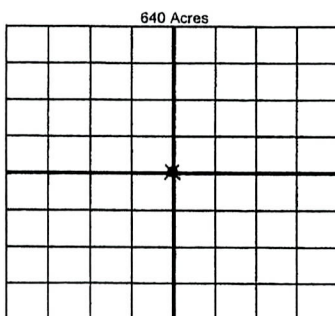
NAMES OF FORMATIONS	TOP
SPRINGER	S210

LEASE NAME VESS WELL NO. 189

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

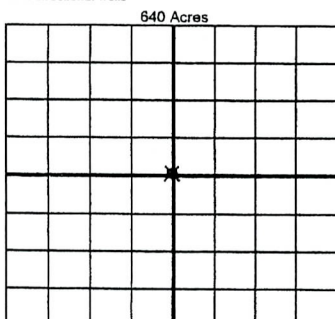
Other remarks: FILING 1002A - TO GET WELL OFF 1003A LIST
WELL IS ACTIVE - FILED PER PHILIP FISHER OCC
FIELD REP.



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



BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

SEC	TWP	RGE	COUNTY
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
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
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
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: