## Oklahoma Corporation Commission Oil & Gas Conservation Division Post Office Box 52000 Oklahoma City, Oklahoma 73152-2000 Rule 165: 10-3-25

API No.: 35049252830000

Well Name: LAUDERDALE 4

OTC Prod. Unit No.:

Drill Type:

Location:

### **Completion Report**

Spud Date: July 12, 2019

Drilling Finished Date: July 13, 2019

1st Prod Date:

Completion Date: December 18, 2019

Purchaser/Measurer:

First Sales Date:

330 FSL 990 FWL of 1/4 SEC Derrick Elevation: 0 Ground Elevation: 0

STRAIGHT HOLE

GARVIN 36 3N 3E

C SE SW SW

Operator: VALLEY PETROL CONSULTING INC 23160

1117 N ELM ST DENTON, TX 76201-2938

	Completion Type	Location Exception	Increased Density
Х	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** Size Weight Grade Feet PSI SAX Top of CMT Туре SURFACE 8 5/8 24 J-55 385 200 SURFACE SURFACE PRODUCTION 5 1/2 15.5 J-55 985 135 Liner Туре Size Weight PSI SAX Top Depth **Bottom Depth** Grade Length There are no Liner records to display.

# Total Depth: 1027

Pac	ker	PI	ug
Depth	Brand & Type	Depth	Plug Type
There are no Packe	r 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			
	ADA						PUMPING						

	Completion	and Test Data by Producing Formation					
Formation Na	me: ADA	Code: 406ADA	Class: DRY				
Spacing C	Drders	Perforated Intervals					
Order No	Unit Size	From	То				
NONE		827	831				
Acid Vol	umes	Fracture Treatments					
500 GA	ALS		NONE				
ormation	Тор	Were o	open hole logs run? Yes				
ADA		827 Date la	ast log run: July 16, 2019				

Were unusual drilling circumstances encountered? No Explanation:

### Other Remarks

OCC - OPERATOR FAILED TO RESPOND TO REQUEST FOR AN INITIAL, TEST LACK OF RESPONSE AND NO ACTICE PUN #, ONLY ONE CLASSIFICATION AVAILABLE DRY HOLE.

# FOR COMMISSION USE ONLY

Status: Accepted

1144775

MI       0.02-2023       PLASE THE SOL USE ALLOCK INCLUS       DELANDA LADER SUBJICATION CONTRACTOR         MILLION CONTRACTOR       Section Control       Marcine Control       Marcine Control       Marcine Control         MILLION CONTRACTOR       Section Control       Marcine Control	A DI													R	][[(	CE		VE	ΞD	).
Description         Description         FFE 1 4 UU0	NO. 043-23203		K UƏE B			NLT			o	KLAHOMA C	ORPORA	TION COMMI	SSION							lev.
Market Brander Versen Ver	C PROD. Attach copy of original 1002A if recompletion or reentry.							у.	Post Office Box 52000					FEB 1 4 2020						
WHE OF BUILDING DEFENDING <ul> <li></li></ul>											Rule 165	:10-3-25		ОК	LAHO	MAC	ORP	ORAT		
All minister index         Bescher index         Bes										COM	IPLETIO	N REPORT	1		C	OMMI	SSI(	DN CN	TON	
BetWeek Week         Set 0.5 PNORES         7/13/2019           South of the set of the		-			HORI	ZONTAL I	HOLE		SPUD	DATE	7/1	2/2019				640 /	Acres			٦
Control         Columnation         Columnation         Columnation         Columnation         Columnation           Control         Columnation	SERVICE WELL	- -	-							FINISHED	7/1	3/2019						·		-
Lade Control         Lade Control         No. C + 14 kpc 0 AT = 14 kpc 0		irvin	SEC	36	TWP		RGE 3	BE			12/	18/2019	].							+
C         To Set M S yr M S yr M Piel         3.0         1/4.860         900         PEODER DATE           EWATCH         Growd         Labbelle Howey         Unysele         Unysele         1/11         1/11         Descentaria         2/11         Descentaria         2/11         Descentaria         1/11         Descentaria         1/11         Descentaria         2/11         Descentaria         Descentaria         2/11         Descentaria         Descentaria <td>AME</td> <td></td> <td></td> <td></td> <td></td> <td>NO.</td> <td></td> <td></td> <td>1st PR</td> <td>OD DATE</td> <td></td> <td></td> <td>_</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>-</td>	AME					NO.			1st PR	OD DATE			_							-
Marker FL         Califies (monos)         (gr Kewn)           Derivation         Valley Petrol Consulting, Inc.         processor (monos)         23160           Computerion         Valley Petrol Consulting, Inc.         processor (monos)         23160           Computerion         (marker TX per 76201-2938)         X         processor (marker TX per 76201-2938)           Computerion         (marker TX per 76201-2938)         Looptrevelue         x         processor (marker TX per 76201-2938)           Computerion         (marker TX per 76201-2938)         Computerion         Status 2000         processor (marker TX per 76201-2938)         x         tooptrevelue           Computerion         (marker TX per 76201-2938)         Computerion         Status 2000         processor (marker TX per 76201-2938)         x         tooptrevelue           Computerion         (marker TX per 76201-2938)         Computerion         Status 2000         processor (marker TX per 76201-2938)         tooptrevelue           Computerion         (marker TX per 76201-2938)         Computerion         Status 2000         processor (marker TX per 76201-2938)         processor (marker TX per 7620-2000)           Computerion         Status 2000         marker TX per 7620-2000         processor (marker TX per 7620-2000)         processor (marker TX per 7620-2000)         processor (marker TX per 7620-2000) </td <td>-</td> <td>/ 1/4 SW 1/4</td> <td>FSL</td> <td>33</td> <td>30</td> <td></td> <td></td> <td>)</td> <td></td> <td></td> <td></td> <td></td> <td>l w</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>-</td>	-	/ 1/4 SW 1/4	FSL	33	30			)					l w							-
Name         Valuety Petrol Consumpt, Inc.         Dilocit Device (Inc.         Dilocit Device (Inc. <thdilocit (inc.<="" device="" th="">         Dilocit Device (I</thdilocit>	Demick FL Grou	nd	Latitud	e (if kno	own)															┥
Introduction       Introduction       Introduction       Introduction       Introduction         Deprint TYPE       CASING & CEMENT (Ferm 1002C must be attached)       Incode to the intervention       Incode to the intervention       Incode to the intervention         All shade 20x86       Casing & CEMENT (Ferm 1002C must be attached)       Incode to the intervention       Incode to the intervention       Incode to the intervention         All shade 20x86       Casing & CEMENT (Ferm 1002C must be attached)       Incode to the intervention       Incode to the intervention       Incode to the intervention         All shade 20x86       B 5/8       24       J55       385       200       Surface         Andread 20x86       B 5/8       24       J55       385       135       Surface         Andread 20x86       B 5/8       24       J55       985       135       Surface         Andread 20x86       B 5/8       24       J55       985       135       Surface         Andread 20x86       B 5/8       102       Type       PLO 8       Type       PLO 8       Type       PLO 8       Type       Type </td <td>· · · · · · · · · · · · · · · · · · ·</td> <td>alley Petrol</td> <td>Consu</td> <td>ulting</td> <td>, Inc</td> <td>•</td> <td>от</td> <td>c/oc</td> <td></td> <td>RATOR NO.</td> <td>2</td> <td>23160</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>┥</td>	· · · · · · · · · · · · · · · · · · ·	alley Petrol	Consu	ulting	, Inc	•	от	c/oc		RATOR NO.	2	23160								┥
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N         INVESTIGATION         INVESTIGATION <thinvestigation< th="">         INVESTIGATION</thinvestigation<>	YTY	Denton	·			STATE			ТΧ	ZiP	762	01-2938			^	LOCAT	E WEL	L		
MUTHE EDDE         OORUUCTOR         Image: Status         Image: Status </td <td>COMPLETION TYPE</td> <td></td> <td></td> <td></td> <td>CASI</td> <td>NG &amp; CE</td> <td>MENT (For</td> <td>rm 1</td> <td>002C m</td> <td>ust be attac</td> <td>hed)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	COMPLETION TYPE				CASI	NG & CE	MENT (For	rm 1	002C m	ust be attac	hed)									
Image: Contraction Date         Deletation Date         Deletation Date           COMMENDED         Suffexace         8 5/8         24         J55         385         200         Suffaxe           COMMENDED         Suffexace         8 5/8         24         J55         385         200         Suffaxe           NOREASED DENSITY         Suffaxe         8 5/8         24         J55         385         200         Suffaxe           NOREASED DENSITY         Suffaxe         NoreAses         9855         135         Suffaxe           PACKER @         BRAND & TYPE         PLUG @         TYPE         TOTAL         TOTAL           PACKER @         BRAND & TYPE         PLUG @         TYPE         TOTAL         1027           PACKER @         BRAND & TYPE         PLUG @         TYPE         TOTAL         1027           DOWER TON         Adg         PLUG @         TYPE         TOTAL         1027         0         BRAND & TYPE         1027         0         0         1027         0         0         1027         0         0         1027         0         0         1027         0         0         1027         0         0         1027         0         0         1	X SINGLE ZONE					TYPE		SI	ZE	WEIGHT	GRA	DE	FEET		PSI	s	AX	TOP	OFCMT	
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Image: Prop Amounts)       Image: Prop Amounts) <th< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></th<>																				
Min Gas Allowable     (155:10-17-7)     Gas Purchaser/Measurer       OR     OR     First Sales Date       INITIAL TEST DATA     Oil Allowable     (165:10-13-3)       INITIAL TEST DATE     Oil Allowable     (165:10-13-3)       INITIAL TEST DATE     Oil Allowable     (165:10-13-3)       OIL-BRUDAY     OIL OIL     OIL       OIL-BRUDAY     OIL OIL     OIL       Gas-OIL RATIO CU FT/BBL     OIL     OIL       WATER-BBUDAY     OIL     OIL       PUMPING OR FLOWING     Pumping     OIL       INITIAL STUT: IN PRESSURE     OIL     OIL       FLOW TUBING PRESSURE     OIL     OIL       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 were supervision and direction, with the data fra facts state herein to be true, correct, and complete to the best of my knowledge of the contents of this report and am authorized by my organization to make this report and am authorized by my organization and direction, with the data fra facts state herein to be true, correct, and complete to the best of my knowledge and belief.	FRACTURE TREATMENT	00	~~	•	<u> </u>															-
OR     First Sales Date       INITIAL TEST DATA     Oil Allowable     (165:10-13-3)       INITIAL TEST DATA     Oil Allowable     (165:10-13-3)	(Fluids/Prop Amounts)		ne																	4
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INITIAL TEST DATE	INITIAL TEST DATA				•	(165-40	-13-31				Fi	rst Sales Date	•		_					
OIL-BBL/DAY       OIL-BBL/DAY         OIL-GRAVITY (API)       GAS-MCF/DAY         GAS-MCF/DAY       GAS-OIL RATIO CU FT/BBL         WATER-BBL/DAY       GAS-OIL RATIO CU FT/BBL         WATER-BBL/DAY       GAS-OIL RATIO CU FT/BBL         PUMPING OR FLOWING       Pumping         INITIAL SHUT-IN PRESSURE       GAS-OIL RATIO CU FT/BBL         CHOKE SIZE       GAS-OIL RATIO CU FT/BEL         A record of the formations drilled through, and pertinent remarks are presented on the reverse. I decigre that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was neparable 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.         A record of the formations drilled through, and pertinent remarks are presented on the reverse. I decigre that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was neparable 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.         A figure TUPE       TUPE       DATE       PHONE NUMBE		2.	Ja All			1100:10														٦
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PUMPING OR FLOWING       Pumping         INITIAL SHUT-IN PRESSURE									-					+						$\neg$
INITIAL SHUT-IN PRESSURE  CHOKE SIZE  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 repeated 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.  SIGNATORE  SIGNATORE  HONE NUMBER  HONE NUMBER		Pum	pina		1				+											┥
CHOKE SIZE       FLOW TUBING PRESSURE       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 adepared 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.         Julie       Julie       Julie         NAME (PRINT OR TYPE)       DATE	INITIAL SHUT-IN PRESSURE		. <u>v</u>																	$\neg$
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 repeated 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.         July       July       State for the contents of this report, which was repeated 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.         State for the formation of the contents of this report and am authorized by my organization to make this report, which was repeated 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.         July       State for the formation of the contents of this report.         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 complete to the best of my knowledge and belief.         Materia       July         NAME (PRINT OR TYPE)       Date         DATE       PHONE NUMBER			w		<u> </u>				+					+			+			┥
to make this report, which was gepared 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.           Image: the second state of					<u> </u>				<u> </u>					<u> </u>						$\neg$
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ADDRESS CITY STATE ZIP EMAIL ADDRESS							-									DRESS				-

PLEASE TYPE OR USE BLACK INK ONLY

FORMATION RECORD Give formation names and tops, if available, or descriptions and thick drilled through. Show intervals cored or drillstem tested.	ness of formations	LEASE NAME	Lauderda	le	WELL NO
drilled through. Show intervals cored or drillstem tested.           NAMES OF FORMATIONS	TOP	UERCE NAME	DISAPPROVED DISAPPROVED logs run? X yes	OR COMMISSION USE O 2) Reject Codes	NLY
Other remarks:		Was H <sub>2</sub> S encour Were unusual dr If yes, briefly exp	illing circumstances encountered	X no at what dep	iths?yes _X_no

 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.

 	 040 /	Acres		

#### BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

SEC	TWP	RGE	COUNT	Y			· · · ·
Spot Location 1/4		1/4			Feet From 1/4 Sec Lines	FSL	FWL
Measured Total Depth			1/4 ical Depth	1/4	BHL From Lease, Unit, or Prop	erty Line:	
			our pope.			erty Line.	

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)

### LATERAL #1

SEC	TWP	RGE	COL	JNTY			
Spot Location 1/4		1/4	1/4	1/4	Feet From 1/4 Sec Lines	FSL	FWL
Depth of			s of Turn		Direction	Total	
Deviation						Length	
Measured Total D	epth	True V	ertical Depth		BHL From Lease, Unit, or Pro	perty Line:	<u> </u>

### LATERAL #2

SEC	TWP	RGE	COUNTY			
Spot Location 1/4	1/4	1/4	1/4	Feet From 1/4 Sec Lines	FSL	FWL
Depth of		Radius of Turn		Direction	Total	
Deviation					Length	
Measured Total Depth		True Vertical Dep	oth	BHL From Lease, Unit, or Prop		
····						

## LATERAL #3 SEC

SEC	TWP		RGE	COUNTY				
Spot Location 1/4	t	1/4	1/4		1/4	Feet From 1/4 Sec Lines	FSL	FWL
Depth of Deviation			Radius of Turn			Direction	Total Length	
Measured Total [	Depth		True Vertical Dep	th		BHL From Lease, Unit, or Prop		