

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.: 35037294520000

Completion Report

Spud Date: July 25, 2020

OTC Prod. Unit No.: 037-226883-0-0000

Drilling Finished Date: July 06, 2020

1st Prod Date: August 05, 2020

Completion Date: August 05, 2020

Drill Type: STRAIGHT HOLE

Well Name: MANNING 1-29

Purchaser/Measurer:

Location: CREEK 29 15N 9E
C NE SW NE
990 FSL 1650 FEL of 1/4 SEC
Derrick Elevation: 0 Ground Elevation: 851

First Sales Date:

Operator: WFD OIL CORPORATION 17501

16800 CONIFER LN
EDMOND, OK 73012-0619

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	7	23	NEW	401		100	SURFACE
PRODUCTION	4 1/2	11.5	NEW	2415		50	1900

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

Total Depth: 2425

Packer		Plug	
Depth	Brand & Type	Depth	Plug Type
There are no Packer 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
Aug 12, 2020	SKINNER	15	46				FLOWING			

Completion and Test Data by Producing Formation			
Formation Name: SKINNER		Code: 404SKNR	Class: OIL
Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
264812	40	2316	2334
Acid Volumes		Fracture Treatments	
500 GALLONS		N/A	

Formation	Top
LAYTON	1250
SKINNER	2300

Were open hole logs run? Yes
Date last log run: August 03, 2020

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY	
Status: Accepted	1145520

API NO. 037 29452
OTC PROD. UNIT NO. 037-226883

(PLEASE TYPE OR USE BLACK INK ONLY)

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000
Rule 165-10-3-25

Form 1002A
Rev. 2009

☒ ORIGINAL
☐ AMENDED (Reason) _____

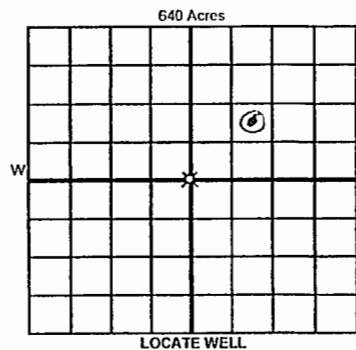
COMPLETION REPORT

TYPE OF DRILLING OPERATION

☒ STRAIGHT HOLE ☐ DIRECTIONAL HOLE ☐ HORIZONTAL HOLE
☐ SERVICE WELL

If directional or horizontal, see reverse for bottom hole location.

COUNTY	Creek	SEC	29	TWP	15N	RGE	9E
LEASE NAME	MANNING			WELL NO.	1-29	DATE OF WELL COMPLETION	8/5/2020
C 1/4 NE 1/4 SW 1/4 NE 1/4	FSL OF 1/4 SEC	990	FWL OF 1/4 SEC	1650	1st PROD DATE	8/5/2020	
ELEVATION	Derrick Ft	Ground	851	Latitude (if known)	Longitude (if known)		
OPERATOR NAME	WFO OIL CORPORATION			OTC/OCC OPERATOR NO.	17501		
ADDRESS	16800 Conifer Lane						
CITY	EDMOND			STATE	OK	ZIP	73012



COMPLETION TYPE

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

CASING & CEMENT (Attach Form 1002C)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	7	23	New	401		100	Surface
INTERMEDIATE							
PRODUCTION	4 1/2	11.5	New	2415		50	1900
LINER							
						TOTAL DEPTH	2425

PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	3kinner					No Frac
SPACING & SPACING ORDER NUMBER	264812 (40)					
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	OIL					
PERFORATED INTERVALS	2316-34					
ACID/VOLUME	500 gal					
FRACTURE TREATMENT (Fluids/Prop Amounts)	N/A					

RECEIVED
AUG 20 2020
Oklahoma Corporation
Commission

☐ Min Gas Allowable (165-10-17-7) OR ☐ Oil Allowable (165-10-13-3) Gas Purchaser/Measurer _____ First Sales Date _____

INITIAL TEST DATA

INITIAL TEST DATE	8-12-2020					
OIL-BBL/DAY	15					
OIL-GRAVITY (API)	46					
GAS-MCF/DAY	75TM					
GAS-OIL RATIO CU FT/BBL	—					
WATER-BBL/DAY	75TM					
PUMPING OR FLOWING	Flowing					
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.

SIGNATURE _____ NAME (PRINT OR TYPE) WFOAST DATE 7/29/2020 PHONE NUMBER 405-715-3130
ADDRESS 16800 Conifer Lane CITY EDMOND STATE OK ZIP 73012 EMAIL ADDRESS Bdoast.wfo@cox.net

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.

LEASE NAME

MANNING

WELL NO.

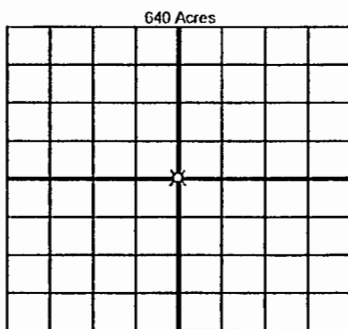
1-29

NAMES OF FORMATIONS	TOP
LAYTON	1250
SKINNER	2300
TD	2425

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	8-3-2020
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	

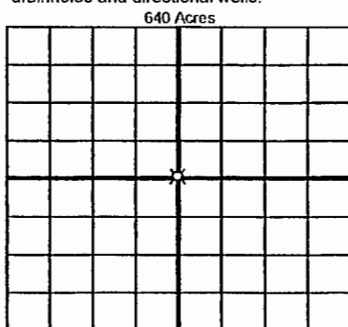
Other remarks:



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
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: