

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.: 35137276270000

Completion Report

Spud Date: September 16, 2021

OTC Prod. Unit No.: 137-047630-0-5410

Drilling Finished Date: September 22, 2021

1st Prod Date: November 02, 2021

Completion Date: October 29, 2021

Drill Type: STRAIGHT HOLE

Min Gas Allowable: Yes

Well Name: DPWU 13-19

Purchaser/Measurer:

Location: STEPHENS 19 2S 4W
C SW SW NE
2310 FNL 2310 FEL of 1/4 SEC
Latitude: 34.369898 Longitude: -97.65778
Derrick Elevation: 994 Ground Elevation: 986

First Sales Date:

Operator: HOGBACK EXPLORATION INC 21161
PO BOX 180368
10101 HIGHWAY 253
FORT SMITH, AR 72918-0368

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	8 5/8	24	J-55	176		110	SURFACE
PRODUCTION	5.5	15.5	J-55	2996		430	SURFACE

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

Total Depth: 3000

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
Nov 04, 2021	TUSSY	19.3	26				PUMPING			

Completion and Test Data by Producing Formation

Formation Name: TUSSY		Code: 404TSSY		Class: OIL	
Spacing Orders		Perforated Intervals			
Order No	Unit Size	From	To		
706276	UNIT	2850	28668		
		2871	2875		
Acid Volumes		Fracture Treatments			
NONE		486 BARRELS SLICKWATER, 22,000 POUNDS 12/20 SAND			

Formation Name: TUSSY		Code: 404TSSY		Class: OIL	
Spacing Orders		Perforated Intervals			
Order No	Unit Size	From	To		
706278	UNIT	2729	2755		
Acid Volumes		Fracture Treatments			
NONE		662 BARRELS SLICKWATER, 35,000 POUNDS 12/20 SAND			

Formation	Top
PERMIAN	0
CISCO	500
HOXBAR	1305
DEESE	1750

Were open hole logs run? Yes
Date last log run: September 21, 2021

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY
<div>Status: Accepted</div> <div>1147322</div>

API NO. 35-137-27627
OTC PROD. UNIT NO. 137 047830 0 5410

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



Form 1002A
Rev. 2021

☒ ORIGINAL
☐ AMENDED (Reason) _____

Rule 165:10-3-25

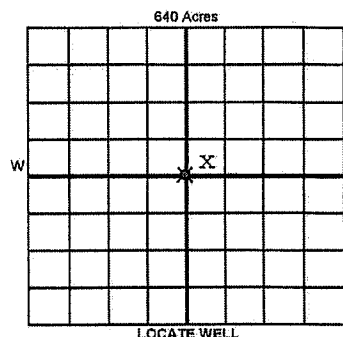
COMPLETION REPORT

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	19	TWP	2S	RGE	4W	SPUD DATE	9/16/2021
LEASE NAME	DPWU	WELL NO.	13-19	DATE OF WELL COMPLETION	10/29/2021	1st PROD DATE			11/02/2021
C	1/4 SW 1/4 SW 1/4 ne 1/4	(FNL)	2310	(FEL)	2310	RECOMP DATE			
ELEVATION	994	Ground	986	Latitude	34.369898	Longitude			-97.657780
OPERATOR NAME	Hogback Exploration, Inc.	OTC / OCC OPERATOR NO.			21161 0				
ADDRESS	P O Box 180368								
CITY	Fort Smith	STATE	AR	ZIP	72918				



COMPLETION TYPE

<input checked="" type="radio"/> SINGLE ZONE	
<input type="radio"/> MULTIPLE ZONE	
Application Date	
<input type="radio"/> COMMINGLED	
Application Date	
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	8 5/8"	24#	J-55	176		110	surface
INTERMEDIATE							
PRODUCTION	5.5"	15.5	J-55	2996		430	surface
LINER							

PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____ TOTAL DEPTH 3000
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	Tussy	Tussy				Reported to Frac Focus
SPACING & SPACING ORDER NUMBER	706276 (unit)	706276 (unit)				
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	Oil	Oil				
PERFORATED INTERVALS	2850-2868 2871-2875	2729-2755				
ACID/VOLUME	none	none				
FRACTURE TREATMENT (Fluids/Prop Amounts)	486 bbls slk wtr 22,000# 12/20 sd.	662 bbls slk wtr, 35,000# 12/20 sd				

☒ 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	11/04/2021					
OIL-BBL/DAY	19.3					
OIL-GRAVITY (API)	26					
GAS-MCF/DAY						
GAS-OIL RATIO CU FT/BBL	0					
WATER-BBL/DAY						
PUMPING OR FLOWING	pumping					
INITIAL SHUT-IN PRESSURE	0					
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	Gerald W. Lundy	DATE	11/04/2021	PHONE NUMBER	479-709-9014
ADDRESS	P O Box 180368	CITY	Fort Smith	STATE	AR
		ZIP	72918	EMAIL ADDRESS	g.lundy@hogbackexploration.com

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
Permian	0
Cisco	500
Hoxbar	1305
Deese	1750

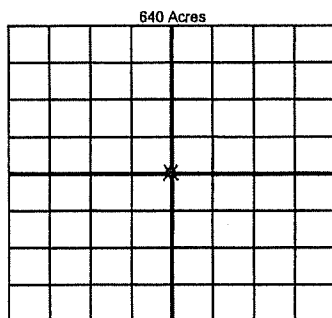
LEASE NAME DPWU

WELL NO. 13-19

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="radio"/> yes <input type="radio"/> no
Date Last log was run	9/21/2021
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?	<input type="radio"/> yes <input checked="" type="radio"/> no
If yes, briefly explain below	

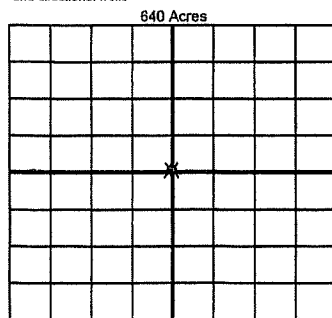
Other remarks:



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
1/4	1/4	1/4	1/4
Measured Total Depth		True Vertical Depth	Feet From 1/4 Sec Lines 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	Total Length
		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	Total Length
		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	Total Length
		BHL From Lease, Unit, or Property Line:	