

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.: 35137242520001

**Completion Report**

Spud Date: December 27, 1985

OTC Prod. Unit No.:

Drilling Finished Date: December 31, 1985

**Amended**

1st Prod Date: January 07, 1986

Amend Reason: CONVERT WELL TO INJECTION

Completion Date: January 05, 1986

Recomplete Date: April 03, 2019

**Drill Type: STRAIGHT HOLE**

**SERVICE WELL**

Well Name: CLEARY-ALLEN 25

Purchaser/Measurer:

Location: STEPHENS 15 3S 5W  
NW SE NW NE  
1815 FSL 825 FWL of 1/4 SEC  
Derrick Elevation: 0 Ground Elevation: 888

First Sales Date:

Operator: BANNER OIL & GAS LLC 22792

907 S DETROIT AVE STE 1035  
TULSA, OK 74120-4317

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			88		100	SURFACE
PRODUCTION	5 1/2			2139		525	SURFACE

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

**Total Depth: 2150**

Packer	
Depth	Brand & Type
979	AD-1
2015	ARROW SET

Plug	
Depth	Plug Type
There are no Plug records to display.	

Initial Test Data
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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
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There are no Initial Data records to display.

### Completion and Test Data by Producing Formation

Formation Name: HOXBAR

Code: 405HXBR

Class: INJ

Spacing Orders	
Order No	Unit Size
There are no Spacing Order records to display.	

Perforated Intervals	
From	To
1048	1048

Acid Volumes	Fracture Treatments
There are no Acid Volume records to display.	There are no Fracture Treatments records to display.

Formation Name: HOXBAR

Code: 405HXBR

Class: INJ

Spacing Orders	
Order No	Unit Size
There are no Spacing Order records to display.	

Perforated Intervals	
From	To
2062	2102

Acid Volumes	Fracture Treatments
There are no Acid Volume records to display.	There are no Fracture Treatments records to display.

Formation	Top
(LOCO SAND) HOXBAR	1048
HOXBAR	2062

Were open hole logs run? No

Date last log run:

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks

RIH AND PERFORATE (LOCO SANDS) HOXBAR 1,048'. SET AD1 PACKER @ 979' MIT, MIT CASING TO 1,000 POUNDS, PLACE WELL ON INJECTION PER PERMIT NUMBER 1905690024.

**FOR COMMISSION USE ONLY**

1142794

Status: Accepted

API NO. 137-24252

OTC PROD.  
UNIT NO.

(PLEASE TYPE OR USE BLACK INK ONLY)

## OKLAHOMA CORPORATION COMMISSION

Oil &amp; Gas Conservation Division

Post Office Box 52000

Oklahoma City, Oklahoma 73152-2000

Rule 165:10-3-25

RECEIVED

Form 1002A

Rev. 2009

MAY 03 2019

OKLAHOMA CORPORATION  
COMMISSION☐ ORIGINAL☒ AMENDED (Reason)

Convert well to injection

## 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 15 TWP 3S RGE 5W

LEASE NAME CLEARY-ALLEN

NW 1/4 SE 1/4 NW 1/4 NE 1/4

FSL OF 1/4 SEC 1815

FWL OF 1/4 SEC 825

SPUD DATE 12/27/1985

DRLG FINISHED DATE 12/31/1985

DATE OF WELL COMPLETION 1/5/1986

1st PROD DATE 1/7/1986

RECOMP DATE 4-3-2019

ELEVATION Derrick FL Ground 888

Latitude (if known)

Longitude (if known)

OPERATOR NAME BANNER OIL &amp; GAS LLC

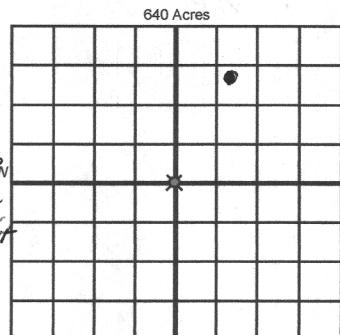
OTC / OCC OPERATOR NO. 22792

ADDRESS 907 S. DETROIT AVENUE, SUITE 1035

CITY TULSA

STATE OK

ZIP 74120



## COMPLETION TYPE

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

## CASING &amp; CEMENT (Attach Form 1002C)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	8 5/8			88		100	SURFACE
INTERMEDIATE							
PRODUCTION	5 1/2			2139		525	SURFACE
LINER							

PACKER @ 979 BRAND &amp; TYPE AD-1

PLUG @

TYPE

PLUG @

TYPE

TOTAL DEPTH 2150

PACKER @ 2015 BRAND &amp; TYPE ARROW SET

PLUG @

TYPE

PLUG @

TYPE

## COMPLETION &amp; TEST DATA BY PRODUCING FORMATION

FORMATION	Hoxbar LOCO SAND	HOXBAR				
SPACING & SPACING						
ORDER NUMBER						
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	INJ	INJ				
	1048	2062 - 2102				
PERFORATED INTERVALS						
ACID/VOLUME						
FRACTURE TREATMENT (Fluids/Prop Amounts)						

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

Gas Purchaser/Measurer



OR

First Sales Date

## INITIAL TEST DATA

Oil Allowable (165:10-13-3)

INITIAL TEST DATE					
OIL-BBL/DAY					
OIL-GRAVITY (API)					
GAS-MCF/DAY					
GAS-OIL RATIO CU FT/BBL					
WATER-BBL/DAY					
PUMPING OR FLOWING					
INITIAL SHUT-IN PRESSURE					
CHOKE SIZE					
FLOW TUBING PRESSURE					

AS SUBMITTED

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.

NATHANIA NAFTALY

SIGNATURE

NATHANIA NAFTALY

NAME (PRINT OR TYPE)

4/30/19

DATE

281-657-4678

PHONE NUMBER

907 S. DETROIT AVENUE, SUITE 1035,

TULSA

OK

74120

NOAUD@HOTMAIL.COM

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.

LEASE NAME CLEARY ALLEN

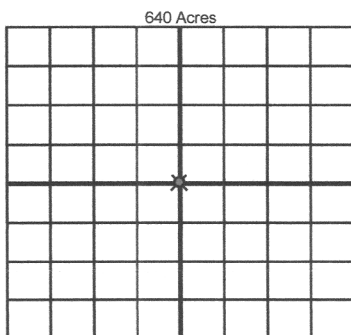
WELL NO. 25

NAMES OF FORMATIONS	TOP
(Loco Sand) <i>Hoxbar</i>	1048
Hoxbar	2062

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

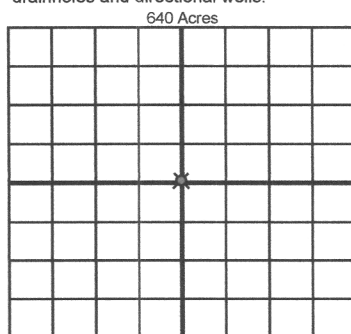
Other remarks: *Hoxbar* RIH & perforate (Loco) Sands 1048. Set AD1 packer @979' MIT casing to 1000# place well on injection per permit #1905690024



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)

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: