Oklahoma Corporation Commission Oil & Gas Conservation Division Post Office Box 52000 Oklahoma City, Oklahoma 73152-2000

Rule 165: 10-3-25

OTC Prod. Unit No.: Drilling Finished Date: March 12, 2019

1st Prod Date: January 09, 2020

Completion Date: November 04, 2019

Drill Type: STRAIGHT HOLE

Well Name: TERBUSH 5 Purchaser/Measurer:

Location: STEPHENS 14 2S 4W

SW NE SW NE

1815 FNL 825 FWL of 1/4 SEC Latitude: 34.38575 Longitude: -97.586028 Derrick Elevation: 0 Ground Elevation: 1110

Operator: WILDHORSE OPERATING COMPANY 20720

PO BOX 1604

301 W MAIN ST STE 550 ARDMORE, OK 73402-1604

| Completion Type | | | | | |
|-----------------|---------------|--|--|--|--|
| Х | Single Zone | | | | |
| | Multiple Zone | | | | |
| | Commingled | | | | |

| Location Exception |
|---|
| Order No |
| There are no Location Exception records to display. |

| Increased Density |
|--|
| Order No |
| There are no Increased Density records to display. |

First Sales Date:

| Casing and Cement | | | | | | | |
|-------------------|------|--------|-------|------|-----|-----|------------|
| Туре | Size | Weight | Grade | Feet | PSI | SAX | Top of CMT |
| PRODUCTION | 5.5 | 17 | NEW | 900 | | 165 | SURFACE |

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

Total Depth: 900

| 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 |
| Jan 09, 2020 | PERMIAN | 1 | 23 | | | | PUMPING | | | |

Completion and Test Data by Producing Formation

March 16, 2020 1 of 2

| Formation Na | ame: PERMIAN | Code: 459PRMN | Class: OIL | |
|--------------|----------------|------------------------------------|----------------------|--|
| Spacing | Spacing Orders | | Perforated Intervals | |
| Order No | Unit Size | From | То | |
| 678752 | 10 | 383 | 434 | |
| Acid Volumes | | Fracture Trea | atments | |
| NON | NE | 19,500 GALLONS, 29,000 POUNDS SAND | | |

| Formation | Тор |
|-----------|-----|
| PERMIAN | 300 |
| GARBER | 700 |

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

Were unusual drilling circumstances encountered? No Explanation:

| Other Remarks | |
|-----------------------------|--|
| There are no Other Remarks. | |
| Inere are no Otner Remarks. | |

FOR COMMISSION USE ONLY

1144770

Status: Accepted

March 16, 2020 2 of 2

UNIT NO.

(PLEASE TYPE OR USE BLACK INK ONLY)

Form 1002A Rev. 2009

| OKLAHOMA CORPORATION COMMISSION | RECEIVED |
|---------------------------------|----------|
| Oil & Gas Conservation Division | |

Post Office Box 52000

FEB 1 3 2020

| X ORIGINAL | | | | Oklahoma C | | | 100 | | | | | |
|---|---|---|------------------------------|-----------------------------------|------------------------------|----------------------------------|------------------------------------|--|------------------------------|--------------------|------------------------|--------|
| AMENDED (Reason) | | | | | Rule 165:10 PLETION F | | | OKLA | HOMA C | ORPO | RATION | l |
| TYPE OF DRILLING OPERATION | | _ | SPUD | DATE | | -2019 | | ì | COMMI 640 Acres | SSIO | N | _ |
| X STRAIGHT HOLE SERVICE WELL | | HORIZONTAL HOLE | | FINISHED | | -2019 | | | | | | |
| If directional or horizontal, see re | | D 20 DOE 4\M | DATE DATE | OF WELL | | | | | | | | 1 |
| LEASE | | VA/ELI | СОМЕ | PLETION | | -2019 | | | | | | 1 |
| NAME | TERBUSH | NO. O | | ROD DATE | 01-09 | -2020 | w | | | ſΠ | | E |
| SW 1/4 NE 1/4 SW | | 615 1/4 SEC 82 | | MP DATE | | | " - | 1 | | | | |
| Demick FL Groui | nd 1110' Latitude (if kr | 7 01.0001 | o (i | ongitude f known) | -97.58 | 86028 | | | | + | | 1 |
| OPERATOR WILE | DHORSE OPERATING | | OTC / OCC OPERATOR | | 207 | 720 | | | \vdash | + | | 1 |
| ADDRESS | P. | O. BOX 1604 | | | | | | | | + | | ł |
| CITY | ARDMORE | STATE | OK | ZIP | 734 | 402 | | | OCATE WE | | | j |
| COMPLETION TYPE | | CASING & CEMENT | (Attach F | orm 1002C) | | | | | | | | - |
| X SINGLE ZONE | | TYPE | SIZE | WEIGHT | GRADE | f | EET | PSI | SAX | TOF | OF CMT | |
| Application Date COMMINGLED | | CONDUCTOR | | | | • | | | | | | |
| Application Date | | SURFACE | | | | | | | ļ | | | |
| LOCATION EXCEPTION ORDER NO. | | INTERMEDIATE | | | | | | - | | | | |
| INCREASED DENSITY ORDER NO. | | PRODUCTION | 5.5" | 17# | NEW | 9 | 900 | | 165 | SU | RFACE | C |
| | | LINER | | | | | | | | | | 0 |
| | ID & TYPE | _PLUG @ | TYPE | | PLUG @ | Т | YPE | | TOTAL DEPTH | ! | 900' | DR |
| | ID & TYPE | _PLUG@ | | | PLUG @ | т | YPE | | | | | 610 |
| | BY PRODUCING FORMATION | 459 PR | MN_ | | | | | | | _ | 1 | ı |
| FORMATION | PERMIAN | | | | | | | | F | epol | tel | |
| SPACING & SPACING ORDER NUMBER | 678752 (10) |) | | | | | | | 1 | 5 Fa | tel u Foo | Ш |
| CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc | OIL | | | | | | | | | | | |
| | 383'-402' | | | | | | | | | | | |
| PERFORATED | | | _ | | | | | | | | | |
| INTERVALS | 414'-434' | | | | | | , | | | | | |
| | | | | | | | | | | | | |
| ACID/VOLUME | NONE | | | | | | | | | | | |
| | | | _ | | | | | | · | | | |
| FRACTURE TREATMENT | 19,500 GALLONS | | | | | | | | | | | |
| (Fluids/Prop Amounts) | 29,000 LBS SAND | | | | | | | | | | | |
| | | | | | · | | | , | | | | |
| | Min Gas Allo | wable (165:10 |)-17-7) | | Gas P | urchaser/Me | easurer | | | IA | | |
| NITIAL TEST DATA | OR Oil Allowable | e (165:10-13-3) | | | First S | Sales Date | | | | - | | |
| NITIAL TEST DATE | 1/9/2020 | (103.10-13-3) | _ | | | | | | <u> </u> | | | |
| OIL-BBL/DAY | 1 | | | | - | | | | - | | | |
| OIL-GRAVITY (API) | 23 | | + | | | | | | | | | i İ |
| GAS-MCF/DAY | 20 | | - | | | | | - | | | | l |
| GAS-OIL RATIO CU FT/BBL | | | + | | _ | | | | | | | 1 |
| WATER-BBL/DAY | | | _ | | _ | | | | | | | l |
| | DUMBINO | | | | _ | *** | | | | | | |
| PUMPING OR FLOWING | PUMPING | | | | | | | | | | | |
| NITIAL SHUT-IN PRESSURE | | | | | | | | | \triangle | | | |
| CHOKE SIZE | | | | | | | | | | | | |
| LOW TUBING PRESSURE | | | | | | | | | | | | |
| A record of the formations drille to make this report, which was | ed through, and pertinent remarks a propered by me or under my supen | are presented on the reve vision and direction, with | erse. I decla the data an | are that I have d facts stated | e knowledge d herein to b | e of the conte be true, corre | ents of this rep ct, and comple | oort and am a ete to the bes | uthorized by t of my know | my orga iedge a | nization nd belief. | |

BRADY SISSON

NAME (PRINT OR TYPE)

1/20/2020

DATE

PHONE NUMBER

P. O. BOX 1604 ARDMORE OK 73402 wildhorse@swbell.net

ADDRESS CITY STATE ZIP EMAIL ADDRESS

PLEASE TYPE OR USE BLACK INK ONLY FORMATION RECORD **TERBUSH** Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested. LEASE NAME WELL NO. NAMES OF FORMATIONS TOP FOR COMMISSION USE ONLY **PERMIAN** 300' ITD on file YES NO **GARBER** 700' APPROVED DISAPPROVED 2) Reject Codes Were open hole logs run? ____yes _X_no Date Last log was run X_no at what depths? Was CO₂ encountered? Was H₂S encountered? no at what depths? Were unusual drilling circumstances encountered? If yes, briefly explain below Other remarks: 640 Acres BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE SEC TWP RGE COUNTY Spot Location Feet From 1/4 Sec Lines FWL FSL Measured Total Depth BHL From Lease, Unit, or Property Line: True Vertical Depth BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS) LATERAL #1 SEC TWP RGE COUNTY Spot Location FSL FWL Feet From 1/4 Sec Lines 1/4 Radius of Turn Direction Total If more than three drainholes are proposed, attach a Length separate sheet indicating the necessary information. Measured Total Depth True Vertical Depth BHL From Lease, Unit, or Property Line: Direction must be stated in degrees azimuth. Please note, the horizontal drainhole and its end LATEDAL #0 point must be located within the boundaries of the lease or spacing unit. Directional surveys are required for all drainholes and directional wells.

640 Acres

| eet From 1/4 Sec Lines | es FSL | - I - I - I - I - I - I - I - I - I - I |
|------------------------|-------------------|---|
| | ~ 1.05 | FWL |
| rection | Total Length | B888889 |
| L From Lease, Unit, | or Property Line: | |
| HL F | From Lease, Unit, | Length From Lease, Unit, or Property Line: |

| LATERA | NL #3 | | | | | | |
|-----------------------|---------------|-----|-----------------|--------|-----------------------------|-----------------|-----------|
| SEC | TWP | RGE | 1 | COUNTY | | | |
| Spot Loc | cation 1/4 | 1/4 | 1/4 | 1/- | Feet From 1/4 Sec Lines | FSL | FWL. |
| Depth of Deviation | 1 | | dius of Turn | | Direction | Total Length | Posterior |
| Measure | d Total Depth | Tr | ue Vertical Dep | th | BHL From Lease, Unit, or Pr | operty Line: | |

API No. 35/3727548 07C/OCC Operator No.

CEMENTING REPORT

То Ассонция Сопрветия Керогг

Foura 1002C (Rev. 2001)

OKLAHOMA CORPORATION COMMISSION

Old & Gas Conservation Division Post Office Box 52000 Oklahoma City, Oklahoma 73452-2000 OAC 165:19-5-4(b)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the comenting company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

1 YPE OR USE BLACK INK ONLY

1 CC Distinct

OCC Distinct

OCC OTC Operator No. 1/307

| | Terbus | sh #5 | | County | Stephei | 15 |
|---|--------------------------|--|--|--|----------------------|--|
| SW 14 NE14 SW 14 N | EM | Sec 14 | A Top | 25 | Stephen Res 44 |) |
| Cement Casing Data | Conductor Casing | Surface Casing | Alternative Casing | Intermediate Casing | Production String | Liner |
| Consenting Date | | | | | 02/18/19 | |
| *Size of Drift Bit (biches) | | | | | 7 7/8" | |
| Namured Swash or lade enlargement used in extentations | | and the second s | | | | |
| Size of Casing (inches O.D.) | | | | | 5 1/2" | |
| *Top of Laner (if Beer used) (h.) | | | | | | |
| *Setting Depth of Casing (ff.) from ground level | | | | | 900 | |
| Type of Cement (API Class) In first Gends or only sharry | | | | | Α | erondente and english side and |
| In second share | | | | | | |
| In third signify | | | | | | |
| Socks of Cement Used in first (lead) or only slurry | | | | The second secon | 165 | |
| In second sharry | | | | | | |
| In third charry | | | | | | |
| Yol of sturry pumped (Ca It #14.X15.) in first éleudt er ordy slurry | | | | | 237.0 | |
| In second shary | | | | | | |
| in frond shirry | | | | | | MANY TO STATE OF THE STATE OF T |
| Casculated Annadar Height of Centert behind Pipe (it) | | | The state of the s | | 1,359 | ··· |
| Cement left in pipe (å) | | | NOTES - MILES | | 0 | |
| *Amount of Surface Casang Required (from Form) | Ú(7 0) | | А. | | | |
| *Was coment carculated to Ground Surface? | √ Y ₅₀ | No | 23Vac Canada Sanda - Ta | - F. Ph. Ph. 6 20 | | 17. |
| *Was Cement Bond Log run? V | | Attach Copy) | *Was Content Staging To *If Yes, at what depth? | oorgery Toom) usess? | Yes | M No |

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

* Designates items to be completed by Operator. Items not so designated shall be completed by the Cementing Company.

Remarks

FS: 900' Casing: 5 1/2" 17# Hole: 7 7/8"

Cement: 165 Sks Class A Cement, 2% Gel,

2% CC, 3# Kol Seal

*Remarks

CEMENTING COMPANY

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.

Signature of Cemesser or Authorized Representative

| Name & Title Printed or Typed | E | Blake Hunter - Cementer | | | | | | | | |
|--|--|---|--|--|--|--|--|--|--|--|
| Company | Quasar Energy Services | | | | | | | | | |
| Address | | 3288 FM 51 | | | | | | | | |
| City 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | and a selection of the angle of the selection of the sele | Gainesville | | | | | | | | |
| Since T. | Χ | ^{Zip} 76240 | | | | | | | | |
| Telephone (AC) Number | · document | 940 612 3336 | | | | | | | | |
| ^{Osec} 02/18/19 | Marin Administration of the control | alternational and alternative of the second | | | | | | | | |

OPERATOR

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented begins

Segment of Operator or Authorized Representative

| 4 to 6 T. | |
|--|--|
| ************************************** | br Trimsed on Typed |
| | Bryce Shearing - President |
| *Operator | |
| | Paul Barton, LLC |
| "Address | |
| | 2435 Deese Road |
| *City | A CONTRACTOR OF THE CONTRACTOR |
| ŕ | Ardmore |
| ***** | THO MOLE |
| - MANY | OK 73401 |
| | OK 173401 |
| *Telephone (| |
| | 5BD-465-1990 |
| *Date | The state of the s |
| | 1-28-20 |
| | |

INSTRUCTIONS

- A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a
 producing well or a dry hole.
 - B) An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
 - C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
- Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
- 3. Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.

(PLEASE TYPE OR USE BLACK INK ONLY)

RECEIVED

| NO. 3513727548 OTC PROD. | · | | · | O | KLAHOMA C | ORPORAT | | | | - L | | י ער הב | == | , |
|--|-----------------------------------|----------------------|------------------|--|---|----------------------------|--------------------------|---------------------------------------|-----------|-------------|--------------------|---------------|------------|-----------|
| UNIT NO. | | | | | | Office Box | | | | 1 | FEB 1 | 3 202 | (1) | |
| XORIGINAL | | | | | Oklahoma Ci | ty, Oklahon Rule 165:10 | | 2000 | | | | | | |
| AMENDED (Reason) | | | | | | LETION F | | | OK | | OMA C | | NOETE | |
| TYPE OF DRILLING OPERATIO | | | | SPUE | D DATE | 03-11 | -2019 | l _ | 1 | , | COMMI 640 Acres | 2210M | | |
| X STRAIGHT HOLE SERVICE WELL | DIRECTIONAL HOLE | HORIZONTAL I | HOLE | | FINISHED | | | | | | | | | İ |
| If directional or horizontal, see rev | | | | DATE | OF WELL | | 2-2019 | | | | | | | |
| COUNTY STEPHE | | | 4W | | PLETION | | -2019 | | | | | | 11 | |
| NAME | TERBUSH | WELL NO. | 5 | 1st PI | ROD DATE | 01-09 | -2020 | | | | | | 1 | İ_ |
| SW 1/4 NE 1/4 SW | 1/4 NE 1/4 FNL OF 1 | 1815' FWL OF 1/4 SEC | 825' | RECO | OMP DATE | | | l "⊢ | _ | \dashv | _ | ++ | + | E |
| ELEVATION Groun | d 1110' Latitude (if k | | 38575 | | Longitude (if known) | -97.5 | 86028 | - | | _ | | | | |
| OPERATOR WILL | HORSE OPERATING | G COMPANY | | 7,000 | ; | 20 | 720 | | | | | | | |
| ADDRESS | | . O. BOX 16 | UPE | RATO | R NO. | | | | | | | | | |
| | | | | 01/ | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 70 | 400 | | | | | | | |
| | ARDMORE | STATE | | OK | - | 734 | 402 |] _ | | LC | OCATE WE | LL | | • |
| X SINGLE ZONE | | CASING & CE | | ttach F | WEIGHT | GRADE | | FEET | | 'SI | SAX | тор о | F CMT | 1 |
| MULTIPLE ZONE | | CONDUCTOR | - ` | | TVEIGHT | GIVADE | | | | <u>~</u> | 3/// | 1 | 5,,,,, | |
| Application Date COMMINGLED | | SURFACE | | | | | | | | | | | | |
| Application Date LOCATION EXCEPTION | | INTERMEDIATI | | | | | ļ | | | \dashv | | | | |
| ORDER NO. INCREASED DENSITY | | PRODUCTION | | 5.5" | 17# | NEW | | 900 | - | - | 165 | SURF | -ACE | 0 |
| ORDER NO. | | LINER | | J. U | 1/# | INEVV | | 900 | + | | 103 | JOK | ACE | |
| 514 | | LINER |] | | <u> </u> | | | · · · · · · · · · · · · · · · · · · · | | _ | TOTAL | 90 | <u></u> | 5 |
| - | ID & TYPE ID & TYPE | PLUG @ PLUG @ | | TYPE TYPE | | PLUG @ PLUG @ | | TYPE _ | | | DEPTH | 90 | | PK, |
| COMPLETION & TEST DATA | | | PRN | | | .FLUG @ | | .'''' | | | | | | |
| FORMATION | PERMIAN | 1 | | | | | | | | | F | Peront | el | |
| SPACING & SPACING | 678752 (10) | | | | | | | | | | 1 | eport Fran | | |
| ORDER NUMBER CLASS: Oil, Gas, Dry, Inj, | 070702 (10) | | | \vdash | | | | | | | - 1 | orial | 100 | uz |
| Disp, Comm Disp, Svc | OIL | | | | | | | | | | | | | |
| | 383'-402' | | | | | | | | | | | | | : |
| PERFORATED | 4441.40.41 | <u> </u> | | | | | | | | | | | | |
| INTERVALS | 414'-434' | | | | | | | | | | | | | |
| | | | | | | | | 1 | | | | | | |
| ACID/VOLUME | NONE | | | | | | | | | | | | | |
| | | | | ╀ | | | | | | | | | | |
| | 19,500 GALLONS | | | | | | | | | | | | | |
| FRACTURE TREATMENT (Fluids/Prop Amounts) | 29,000 LBS SAND | | | | | | | | | | | | | |
| (| | | | ╁ | | - | | | | | <u> </u> | | | |
| | | | | | | | | | | | | | | |
| | Min Gas All | | (165:10-17 | 7-7) | | | Purchaser/ Sales Date | | | | 1 | NA . | | |
| INITIAL TEST DATA | Oil Allowab | | 13-3) | | | LIISC | Jaies Date | , | - | | | | | |
| INITIAL TEST DATE | 1/9/2020 | | | | | | | | | | | | | |
| OIL-BBL/DAY | 1 | | | | | | | | | | | | | |
| OIL-GRAVITY (API) | 23 | 1 | | | | | | | | | | | | |
| GAS-MCF/DAY | | 1 | | T | | | | | | - | | | | |
| GAS-OIL RATIO CU FT/BBL | | | | T | | | ···· | — <u> </u> | | | | | + | |
| WATER-BBL/DAY | | | | + | | | | | | | | | - | |
| PUMPING OR FLOWING | PUMPING | | | \vdash | | | | | | | -+ | | | |
| INITIAL SHUT-IN PRESSURE | . 0.0.1 | 1 | | \vdash | | + | | | | | - | | | |
| | | | | \vdash | | | | | | | + | | | |
| CHOKE SIZE | | | | \vdash | | _ | | | | <u></u> | | | | |
| FLOW TUBING PRESSURE | ed through, and nodices and | are presented := | the re- | 0 1 242 | nioso that I b | (o knowner) | on of the | ntonta af # | ropert 1 | om - | thorized | , mu on | zotico | |
| A record of the formations drill | ed through, and pertinent remarks | are presented on | THE REVERSE | ь. гаес | uare (nat i na) | re knowled | Je of the co | HILETIES OF THIS | ιεροπ and | am at | unionzea by | , my orga⊓i | ∠au0∏ | 1 |

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. **BRADY SISSON**

NAME (PRINT OR TYPE)

1/20/2020

DATE

PHONE NUMBER

P. O. BOX 1604 ARDMORE OK 73402 wildhorse@swbell.net

ADDRESS CITY STATE ZIP EMAIL ADDRESS

True Vertical Depth

Length

BHL From Lease, Unit, or Property Line:

Deviation

Measured Total Depth