

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.: 35137275490000

**Completion Report**

Spud Date: February 25, 2019

OTC Prod. Unit No.:

Drilling Finished Date: February 26, 2019

1st Prod Date: January 09, 2020

Completion Date: November 14, 2019

**Drill Type: STRAIGHT HOLE**

Well Name: TERBUSH 2

Purchaser/Measurer:

Location: STEPHENS 14 2S 4W  
SE SW NW NE  
1155 FNL 495 FWL of 1/4 SEC  
Latitude: 34.387583 Longitude: -97.587111  
Derrick Elevation: 0 Ground Elevation: 1110

First Sales Date:

Operator: WILDHORSE OPERATING COMPANY 20720  
PO BOX 1604  
301 W MAIN ST STE 550  
ARDMORE, OK 73402-1604

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
PRODUCTION	5.5	17	NEW	573		110	SURFACE

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

**Total Depth: 900**

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
Jan 09, 2019	PERMIAN	1	23				PUMPING			

Completion and Test Data by Producing Formation										
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Formation Name: PERMIAN		Code: 459PRMN	Class: OIL
<b>Spacing Orders</b>		<b>Perforated Intervals</b>	
<b>Order No</b>	<b>Unit Size</b>	<b>From</b>	<b>To</b>
678752	10	486	502
<b>Acid Volumes</b>		<b>Fracture Treatments</b>	
NONE		13,000 GALLONS, 16,000 POUNDS SAND	

Formation	Top
PERMIAN	300
GARBER	700

Were open hole logs run? No  
Date last log run:  
  
Were unusual drilling circumstances encountered? No  
Explanation:

<b>Other Remarks</b>
There are no Other Remarks.

<b>FOR COMMISSION USE ONLY</b>	
Status: Accepted	1144768

API NO. 3513727549  
OTC PROD.  
UNIT NO.

(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

RECEIVED

Form 1002A  
Rev. 2009

FEB 13 2020

☒ 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 STEPHENS SEC 14 TWP 2S RGE 4W  
LEASE NAME TERBUSH WELL NO. 2  
SE 1/4 SW 1/4 NW 1/4 NE 1/4 FNL OF 1/4 SEC 1155' FWL OF 1/4 SEC 495'  
ELEVATION Derrick FL Ground 1110' Latitude (if known) 34.387583 Longitude (if known) -97.587111  
OPERATOR NAME WILDHORSE OPERATING COMPANY OTC / OCC OPERATOR NO. 20720  
ADDRESS P. O. BOX 1604  
CITY ARDMORE STATE OK ZIP 73402

SPUD DATE 02-25-2019  
DRLG FINISHED DATE 02-26-2019  
DATE OF WELL COMPLETION 11-14-2019  
1st PROD DATE 01-09-2020  
RECOMP DATE  
Longitude (if known) -97.587111

OKLAHOMA CORPORATION COMMISSION

LOCATE WELL

COMPLETION TYPE

☒ SINGLE ZONE  
☐ MULTIPLE ZONE  
Application Date  
☐ COMMINGLED  
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							
INTERMEDIATE							
PRODUCTION	5.5"	17#	NEW	573		110	SURFACE
LINER							

PACKER @ NA BRAND & TYPE PLUG @ TYPE PLUG @ TYPE  
PACKER @ NA BRAND & TYPE PLUG @ TYPE PLUG @ TYPE

TOTAL DEPTH 900'

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	PERMAIN					
SPACING & SPACING ORDER NUMBER	678752 (10)					Reported to Frac Focus
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	OIL					
PERFORATED INTERVALS	486'-502'					
ACID/VOLUME	NONE					
FRACTURE TREATMENT (Fluids/Prop Amounts)	13,000 GALLONS					
	16,000 LBS SAND					

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	1/9/2019					
OIL-BBL/DAY	1					
OIL-GRAVITY ( API)	23					
GAS-MCF/DAY						
GAS-OIL RATIO CU FT/BBL						
WATER-BBL/DAY						
PUMPING OR FLOWING	PUMPING					
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 BRADY SISSON DATE 1/20/2019 PHONE NUMBER 580-223-0936

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

Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

LEASE NAME Terbush WELL NO. 2

NAMES OF FORMATIONS	TOP
PERMIAN	300'
GARBER	700'

FOR COMMISSION USE ONLY

ITD on file ☐ YES ☐ NO

APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

2) Reject Codes

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Were open hole logs run? \_\_\_\_ yes X no

Date Last log was run \_\_\_\_\_

Was CO<sub>2</sub> encountered? \_\_\_\_ yes X no at what depths? \_\_\_\_\_

Was H<sub>2</sub>S encountered? \_\_\_\_ yes X no at what depths? \_\_\_\_\_

Were unusual drilling circumstances encountered? \_\_\_\_ yes X no

If yes, briefly explain below

Other remarks:

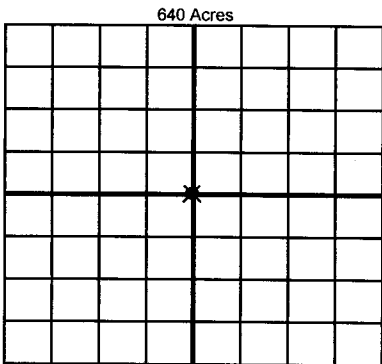
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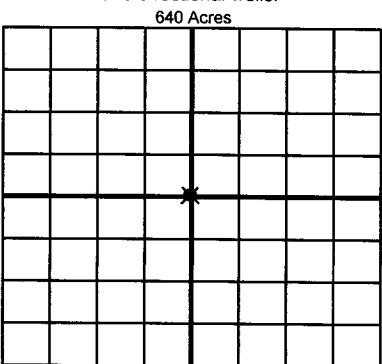
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If more than three drainholes are proposed, attach a separate sheet indicating the necessary information.

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:

API No.
OTC/ OCC Operator No. <b>3513727549</b>

**CEMENTING REPORT**  
To Accompany Completion Report

Form 1002C  
(Rev. 2001)

**OKLAHOMA CORPORATION COMMISSION**  
Oil & Gas Conservation Division  
Post Office Box 52000  
Oklahoma City, Oklahoma 73152-2000  
OAC 165:10-3-4(h)

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 cementing 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.

**TYPE OR USE BLACK INK ONLY**

*Field Name	OCC District
*Operator <b>Paul Burton</b>	OCC/OTC Operator No. <b>11307</b>
*Well Name No. <b>Terbush 2</b>	County <b>Stephens</b>
*Location <b>SE 1/4 SW 1/4 NW 1/4 NE 1/4</b>	Sec <b>14</b> Twp <b>25</b> Rge <b>4W</b>

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date					<b>03/01/19</b>	
*Size of Drill Bit (Inches)					<b>7.875</b>	
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (inches O.D.)					<b>5.5</b>	
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level					<b>573</b>	
Type of Cement (API Class)					<b>A</b>	
In first (lead) or only slurry						
In second slurry						
In third slurry						
Sacks of Cement Used					<b>110</b>	
In first (lead) or only slurry						
In second slurry						
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry					<b>145.2</b>	
In second slurry						
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)					<b>745</b>	
Cement left in pipe (ft)					<b>1</b>	

*Amount of Surface Casing Required (from Form 1000)	ft.
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*Was cement circulated to Ground Surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*Was Cement Bond Log run?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth?	ft

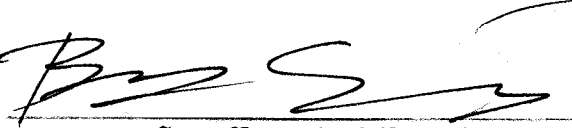
**CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM**

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

Remarks
Circulated 5 Bbls cement to surface

*Remarks
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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 Cementer or Authorized Representative

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 herein.

Signature of Operator or Authorized Representative

Name & Title Printed or Typed	David Zimmerer- Cementer	
Cementing Company	Quasar Energy Services	
Address	3288 FM 51	
City	Gainesville	
State	TX	Zip 76240
Telephone (AC) Number	940 612 3336	
Date	03/11/19	

*Name & Title Printed or Typed	Bryce Shearing - President	
*Operator	Paul Burton, LLC	
*Address	2435 Deese Road	
*City	Ardmore	
*State	OK	*Zip 73401
*Telephone (AC) Number	580-465-1990	
*Date	1-28-20	

#### INSTRUCTIONS

1. 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.
2. 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).
4. IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.

API NO. 3513727549  
OTC PROD.  
UNIT NO.

(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

RECEIVED

Form 1002A  
Rev. 2009

FEB 13 2020

☒ 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	STEPHENS	SEC	14	TWP	2S	RGE	4W	SPUD DATE	02-25-2019
LEASE NAME	TERBUSH	WELL NO.	2	DRLG FINISHED DATE	02-26-2019				
SE 1/4 SW 1/4 NW 1/4 NE 1/4	(FNL OF 1/4 SEC 1155' FWL OF 1/4 SEC 495')	DATE OF WELL COMPLETION	11-14-2019						
ELEVATION Derrick FL	Ground 1110'	Latitude (if known)	34.387583	Longitude (if known)	-97.587111				
OPERATOR NAME	WILDHORSE OPERATING COMPANY			1st PROD DATE	01-09-2020				
ADDRESS	P. O. BOX 1604			RECOMP DATE					
CITY	ARDMORE	STATE	OK	ZIP	73402				

OKLAHOMA CORPORATION COMMISSION


LOCATE WELL

COMPLETION TYPE

<input checked="" type="checkbox"/> SINGLE ZONE	
<input type="checkbox"/> MULTIPLE ZONE	
Application Date	
<input type="checkbox"/> COMMINGLED	
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							
INTERMEDIATE							
PRODUCTION	5.5"	17#	NEW	573		110	SURFACE
LINER							
							TOTAL DEPTH 900'

PACKER @ NA BRAND & TYPE PLUG @ TYPE PLUG @ TYPE  
PACKER @ NA BRAND & TYPE PLUG @ TYPE PLUG @ TYPE

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	PERMAIN					
SPACING & SPACING ORDER NUMBER	678752 (10)					
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	OIL					
PERFORATED INTERVALS	486'-502'					
ACID/VOLUME	NONE					
FRACTURE TREATMENT (Fluids/Prop Amounts)	13,000 GALLONS					
	16,000 LBS SAND					

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	1/9/2019				
OIL-BBL/DAY	1				
OIL-GRAVITY ( API)	23				
GAS-MCF/DAY					
GAS-OIL RATIO CU FT/BBL					
WATER-BBL/DAY					
PUMPING OR FLOWING	PUMPING				
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.

BRADY SISSON

1/20/2019

580-223-0936

SIGNATURE

NAME (PRINT OR TYPE)

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

Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

LEASE NAME Terbush WELL NO. 2

NAMES OF FORMATIONS	TOP
PERMIAN	300'
GARBER	700'

## FOR COMMISSION USE ONLY

ITD on file ☐ YES ☐ NO

APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

2) Reject Codes

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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:

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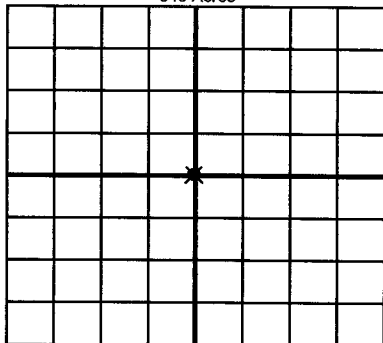


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640 Acres



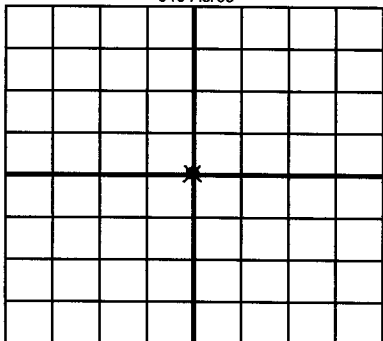
If more than three drainholes are proposed, attach a separate sheet indicating the necessary information.

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.

640 Acres



## BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Measured Total Depth	True Vertical Depth	BHL From Lease, Unit, or Property Line:	FSL FWL

## BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)

## LATERAL #1

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn	Direction	Total Length
Measured Total Depth	True Vertical Depth	BHL From Lease, Unit, or Property Line:	FSL FWL

## LATERAL #2

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn	Direction	Total Length
Measured Total Depth	True Vertical Depth	BHL From Lease, Unit, or Property Line:	FSL FWL

## LATERAL #3

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn	Direction	Total Length
Measured Total Depth	True Vertical Depth	BHL From Lease, Unit, or Property Line:	FSL FWL