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

Rule 165: 10-3-25

API No.: 35107236110000 **Completion Report** Spud Date: March 29, 2019

OTC Prod. Unit No.: Drilling Finished Date: April 04, 2019

1st Prod Date:

First Sales Date:

Completion Date: January 27, 2020

Drill Type: STRAIGHT HOLE

Well Name: ERDMAN 2-22 Purchaser/Measurer:

OKFUSKEE 22 12N 8E Location:

NE SW SE NW 585 FSL 1830 FWL of 1/4 SEC

Latitude: 35.502135 Longitude: -96.453018 Derrick Elevation: 0 Ground Elevation: 847

SPESS OIL COMPANY INC 2057 Operator:

> 200 S BROADWAY ST CLEVELAND, OK 74020-4617

Completion Type
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.

Casing and Cement										
Туре	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT			
SURFACE	8 5/8	24	J-55	745		380	SURFACE			
PRODUCTION	5 1/2	15.5	J-55	3624		50	3202			

Liner										
Туре	Size	Weight	Grade	Length	PSI	SAX	Top Depth	Bottom Depth		
LINER	2 7/8	6.5	J-55	0	0	50	SURFACE	3657		

Total Depth: 3657

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 27, 2020	UNION VALLEY- CROMWELL					70	SWABBIN G	25				

March 16, 2020 1 of 2

	Completion and	Test Data by Producing Fo	ormation	
Formation N	ame: UNION VALLEY-CROMWELL	Code: 402UVCM	Class: DRY	
Spacing	Orders	Perforated In	tervals	
Order No	Unit Size	From	То	
661440	40	3635	3645	
Acid Vo	olumes	Fracture Trea	atments	
2,000 GA	ALLONS	NONE		

Formation	Тор
UNION VALLEY-CROMWELL	3635

Were open hole logs run? Yes Date last log run: April 04, 2019

Were unusual drilling circumstances encountered? No Explanation:

Other Remarks	
There are no Other Remarks.	

FOR COMMISSION USE ONLY

1144765

Status: Accepted

March 16, 2020 2 of 2

MULTIPLE ZONE

Application Date COMMINGLED

Application Date LOCATION EXCEPTION

ORDER NO. INCREASED DENSITY

ORDER NO.

OTC PROD.

UNIT NO.

Form 1002A Rev. 2009

OI	KLAHOMA C	ORPOR	ATION COM	/iission	R	<u>}</u> [這	/0)		F	
	Oil & Ga Pos Oklahoma C		FEB 1 1 2020												
		Rule 165	:10-3-25 N REPORT	_	O	KLAI	HOM				TIOI	N			
UE	DATE	3-	29-19	г				640	SSI(1	/N				
TE	FINISHED	NISHED 4-4-											-		
	OF WELL PLETION	1/2	7/2020]									\mathbf{I}		
PI	ROD DATE		NA				×				_	-	Ł		
CC	MP DATE			l w					⇤			-	E		
	ongitude if known)			i	_					_					
CC 2057							▙	_	_		-				
_					\dashv							_	-		
OK ZIP 74020			1 L												
1 F	orm 1002C	1		j			L	JCAI	E WE	LL					
	WEIGHT GRADE		FEET		PSI SAX		AX	TOP OF CMT]				
3	24	J55		745				38	30	9)	SURI	F			
2	15.5	J55		3624				50		,	3202	2			
}	6.5	J55	sulface	3657				5	0	3	3,450)			
PE		PLUG @	<u> </u>	TYPE _				OTAL			3,657	7			
PE	VI	PLUG @	2	TYPE _					,				•		
_	•]		
		_													
													ļ		

UNIT NO.													Office Box		
ORIGINAL AMENDED (Reas	on)											F	ty, Oklahom Rule 165:10 PLETION F	-3-25	-200
TYPE OF DRILLING OP X STRAIGHT HOLE			CTION	AL HO	LE]HORIZ	ZONTAL I	HOLE	SPUD	DATE	<u> </u>	3-29	9-19]
SERVICE WELL If directional or horizonta	l, see re	verse	for bott	om hol	e locatior	1.				DRLG DATE		HED	. 4-4	-19	1
	FUS	KEE		SEC	22	TWF	12N	RGE	08E	DATE COMP			1/27/	2020	
LEASE NAME		E	RDM	IAN				WELL NO.	2-22	1st PR	OD D	ATE	N	A].
NE 1/4 SW 1/4	SE	1/4	NW	1/4	FSL OF 1/4 SEC	5	85	FWL OF 1/4 SEC	1830	RECO	MP D	ATE	·		1
ELEVATION Derrick FL	Groun	d	84	47	Latitude	(if kn	own)				ongitu f know				1
OPERATOR NAME		S	PES	S OI	L COI	MP/	ANY		- 1	/ OCC	R NO.		20	57	1
ADDRESS					200) S.	BRC)ADW	AY ST.						1
CITY	С	LEV	ELA	ND				STATE		OK		ZIP	740	20	1
COMPLETION TYPE							CASI	NG & CE	MENT (At	tach F	orm 1	002C)			_
SINGLE ZONE								TYPE		SIZE		IGHT	GRADE	,	FE

CONDUCTOR

INTERMEDIATE

PRODUCTION

LINER

SURFACE

PACKER @BR	AND & TYPE	PLUG @	TYPE	PLUG @	TYPE	TOTAL DEPTH	3,657
PACKER @BRA	AND & TYPE	PLUG @	TYPE	PLUG @			
COMPLETION & TEST DA	TA BY PRODUCING FORMATION	N-4020	IN C/YT				
FORMATION	UNIONVALLEY- CROMWELL						
SPACING & SPACING ORDER NUMBER	40 AC/661440						
CLASS: Oil, Gas, Dry, Inj,							
Disp, Comm Disp, Svc	DRY			ŀ		ľ	
	3635-3638						
PERFORATED INTERVALS	3638-3645						
	·						
ACID/VOLUME	2000 gale	}					
FRACTURE TREATMENT (Fluids/Prop Amounts)	None					·	
	Min Gas Allo	wahle (165	i:10-17-7)	Gae Burch	asor/Moasurer	•	

8 5/8

5 1/2

2 7/8

	OR	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	First Sales Date	
INITIAL TEST DATA	Oil Allowable	(165:10-13-3)	That Sales Date	
INITIAL TEST DATE	1/27/2020			
OIL-BBL/DAY	TRACE			
OIL-GRAVITY (API)	NA			
GAS-MCF/DAY	TSTM			
GAS-OIL RATIO CU FT/BBL	NA			
WATER-BBL/DAY	70			
PUMPING OR FLOWING	SWABBING			
INITIAL SHUT-IN PRESSURE	25PSI			
CHOKE SIZE				
FLOW TUBING PRESSURE				
A record of the formations della-				L

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 as 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. **RICHARD SPESS**

200 S BROADWAY ST

ADDRESS

NAME (PRINT OR TYPE) **CLEVELAND** OK

STATE

CITY

74020

ZIP

DATE PHONE NUMBER SPESSOILCO@SBCGLOBAL.NET

918-358-5831

EMAIL ADDRESS

PLEASE TYPE OR USE BLACK INK ONLY

Give for drilled th	matio rough	n name n. Show	s and t	ops, if	FOF availa	MATIO	PN RECORD descriptions and the national rested.	ickness of formation	ns	LEASE N	NAME	ERDMAN		_ WELL N	NO1
NAMES	OF F	ORMA	TIONS					TOP	7			FOR	R COMMISSION	USE ONLY	
UNIO	N V	ALLE	Y-CI	ROM	WE	L		3,635	7	ITD 61			CONNINIOOION	JOL ONL!	
ТОТА	rr D	EPTH	1					3,657		APPROV	·	ESNO	2) Reject Codes		
										i:					
							•								
										Date Last	en hole logs run t log was run encountered?		4/4/2019 X no at wh		
										Was H₂S	encountered?	yes	X no at wh	at depths?	
										Were unu If yes, brid	isual drilling circ efly explain belo	zumstances encountered W	1?	ye	s X no
Other ren	narks	: ::													
		_		-				·							
								-							
										.			<u> </u>		
								· · · · · · · · · · · · · · · · · · ·							
					-										
	T	640	O Acres	<u> </u>	т-			HOLE LOCATION	FOR	DIRECTIONAL HO	OLE				
\dashv	+-		╁	+	+	+	SEC	TWP	RGE		COUNTY				
-	╅	+-	+	╁	\dagger	+	Spot Loca	1/4	1/4	1/4			1		FWL
	+	+-	╁	\dagger	\dagger	H	Measured	Total Depth		True Vertical De	epth	BHL From Lease, Uni	, or Property Line):	
十	+	_	╇	十	十	\vdash							·		
	†	+	十	\vdash	+-			HOLE LOCATION	FOR I	HORIZONTAL HO	LE: (LATERAL	.S)			
_	+	+	1	+	+	+	SEC SEC	TWP	RGE		COUNTY				
_	╁	-	1		1	\vdash	Spot Loca		1			Feet From 1/4 Sec Lin	es FSL		FWL
							Depth of	1/4	1/4	1/4 Radius of Turn	1/4	Direction	Total		FVVL
f more thar separate sh	n three neet ind	drainhol dicating t	les are p he nece	oropose essary i	ed, attac nformat	tha ion.	Deviation Measured	Total Depth		True Vertical De	pth	BHL From Lease, Unit	Length , or Property Line	<u>1</u> :	
Direction m															
Please note point must b	be loca	ated with					LATERAL	. #2							
ease or spa	-						SEC	TWP	RGE		COUNTY			-	
Direction Irainhole	al su es an	d direc	tional	wells	of for a	ii	Spot Loca	tion 1/4	1/4	1/4	1/4	Feet From 1/4 Sec Lin	es FSL		FWL
- -		640	Acres	Т	т-		Depth of Deviation			Radius of Turn		Direction	Total Length	153-3-3	:-:
+	╁	+	\vdash	-	_	\vdash		Total Depth		True Vertical Dep	pth	BHL From Lease, Unit			
	+	+	T	\dagger	\vdash	H	L			<u> </u>					
\top	+	+	t	\vdash	 	H	SEC SEC	TWP	RGE	· · · · · · · · · · · · · · · · · · ·	COUNTY				
\top	${\dagger}$	+	*	\vdash		$\vdash \vdash$	Spot Loca					Foot From 4/4 Cool in	ne Iro	199	FIA"
+	十	+-	\vdash	\vdash	\vdash	H	Depth of	1/4	1/4	1/4 Radius of Turn	1/4	Feet From 1/4 Sec Line Direction	es FSL Total		FWL
\dashv	+	+-	\vdash	 	\vdash	\vdash	Deviation Measured	Total Depth		True Vertical Dep		BHL From Lease, Unit,	Length		
	+	-	-	<u> </u>	<u> </u>	Щ		•				=	sporty Line.		

CEMENTING REPORT

Form 1002C Rev. 2012

OKLAHOMA CORPORATION COMMISSION

API No. 107-23611

Oil & Gas Conservation Division Post Office Box 52000 Oklahoma City, Oklahoma 73152-2000 OAC 165:10-3-4(i)

This form shall be filed with 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(i). It may be advisable to take a copy of this form to location when cementing work is performed.

			E BLACK INK O	NLY						
*Operator	SPES	SOIL Co.	Inc,		осс/отс	2057				
*Well Name/No.		1AN 2 - 22		•	County	OKF	JSKEE			
*Location NE 1/4 SW 1/4 51	= 1/4 NW	1 /4 Sec	22	Twp	12 N	Rge	8 E			
Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing		rmediate Casing	Production String	Liner			
Cementing Date	·	3/30/19								
*Size of Drill Bit (Inches)		12 1/4				····				
*Estimated % wash or hole enlargement used in calculations		90								
*Size of Casing (inches O.D.)		8 5/8								
*Top of Liner (if liner used) (ft.)										
*Setting Depth of Casing (ft.) from ground level		745				· · · · · · · · · · · · · · · · · · ·				
Type of Cement (API Class) In first (lead) or only slurry		REG								
In second slurry		REG								
In third slurry										
Sacks of Cement Used In first (lead) or only slurry		250				· · · · · · · · · · · · · · · · · · ·				
In second slurry		130				*				
In third slurry						· · · · · · · · · · · · · · · · · · ·				
Vol of slurry pumped (Cu ft)(14.X15.) In first (lead) or only slurry	****	420				<u>.</u>				
In second slurry		153								
In third slurry										
Calculated Annular Height of Cement behind pipe (ft)		G.L.				······································				
Cement left in pipe (ft)		42								
*Amount of Surface Casing Required (from Form 1000)	Amount of Surface Casing Required (from Form 1000) ft.									
*Was cement circulated to Ground Surface?	XX Yes	No	*Was Cement Stagi	ng Tool (DV T	ool) used?	Yes	XX No			
*Was Cement Bond Log run? Yes	No (If so,	Attach Copy)	*If Yes, at what dep	oth?			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	*Remarks	

CEMENTING COMPANY

I declare under applicable Corporation Commission rule, that I am authorized to make 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 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

Name & Title (Printed or Typed)		J.B. Niccum - Manager							
Cementing Company	Oklahom	Oklahoma Cementing Cushing, LLC							
Address		P.O. Box 590							
City		Cushing							
State	ОК	Zip	74023						
Telephone		(040) 005 0	200						

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.



Name & Title (Printed or Typed)	CAROL SPESS,	OWNER
*Operator		
	SPESS OIL C	OMPANY
*Address	200 S. BROA	DWAY ST.
*City	CLEVELAND	
*State	OK	*Zip 74020
Telephone		
(AC) Number	918-358-583	1
*Date	FEBRUARY 7,	2020

INSTRUCTIONS

- 1. A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, with the Completion Report (Form 1002A) for a producing well or a dry hole.
 - B) An original of this form shall be filed with 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.
- 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.

Form 1 Rev.

CEMENTING REPORT

API No.

107-23611

OKLAHOMA CORPORATION COMMISSION

Oil & Gas Conservation Division Post Office Box 52000 Oklahoma City, Oklahoma 73152-2000 OAC 165:10-3-4(i)

This form shall be filed with 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(i). It may be advisable to take a copy of this form to location when cementing work is performed.

						7	TYPE OR US	SE BLACK II	NK ON	LY			
*Operator				SPE	SS OII	CO	MPANY				осс/отс		02057
*Well Name/No.					ERD	MAN	2-22			· · · · · · · · · · · · · · · · · · ·	County	OKF	JSKEE
*Location NE 1/4	SW	1 /4	SE	1 /4	NW	1 /4	Sec	22		Twp	12N	Rge	08E
Cement Casi	ng Data			Condu Casi			Surface Casing	Altern Cas			rmediate Casing	Production String	Liner
Cementing Date												04/19/19	12/18/19
*Size of Drill Bit (Inches)												7 7/8	4 3/4
*Estimated % wash or hole enla calculations	rgement us	ed in										120 %	120 %
*Size of Casing (inches O.D.)	_											5 1/2	2 7/8
*Top of Liner (if liner used) (ft.))						- 						SURFAC
*Setting Depth of Casing (ft.) ground level		f	rom									3624	3657
Type of Cement (API Class) In first (lead) or only slurry											'	Α	А
In second slurry					·-							M	
In third slurry					•								
Sacks of Cement Used In first (lead) or only slurry												50	50
In second slurry												, 444	
In third slurry												, ^{, , ,} , , , , , , , , , , , , , , ,	
Vol of slurry pumped (Cu ft)(14 In first (lead) or only slurry	X15.)											73	59
In second slurry													
In third slurry		-											
Calculated Annular Height of Ce behind pipe (ft)	ment											365	533
Cement left in pipe (ft)												1	1
Amount of Surface Casing Req	uired (from	Form 10	00)				740		ft.				
Was cement circulated to Groun	nd Surface?	·		Y	es	<u>x</u> N	ło	*Was Cement	Staging	Tool (DV To	ool) used?	Yes	X No
Was Cement Bond Log run?		<u>X</u> Y	es	N	o (If so	Attach	Сору)	*If Yes, at wh	at 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		*Remarks	
	Ī		
	·		
•			

CEMENTING COMPANY

I declare under applicable Corporation Commission rule, that I am authorized to make 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 on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.

Significant of Computer of Appliorized Representative

Name & Title	. ICI		OFMENTER
(Printed or Typed)	, J⊑I	FREY SPESS	6, CEMENTER
Cementing	SDESS OIL C	OMBANY OIL	WELL OFMENTEDS
Company	SPESS OIL C	OWPANT OIL	WELL CEMENTERS
Address	2	00 S. BROADV	VAY ST.
City		CLEVELAND)
State	OK	Zip	74020
Telephone		040 250 50	224
(AC) Number		918-358-58	331
Date		02/07/20	

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 for are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.

Signature of Operation Authorized Representative

Name & Title	CAROL SPESS, OWNER									
(Printed or Typed)										
*Operator	SPESS OIL COMPANY									
*Address	200 S. BROADWAY ST.									
*City	CLEVELAND									
*State	OK	*Zip	74020							
Telephone	010 250 5021									
(AC) Number	918-358-5831									
*Date		02/07/20								

INSTRUCTIONS

- A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, with the Completion Report (Form 1002A) for a producing well or a dry hole.
 - B) An original of this form shall be filed with 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.
- 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.

ADDRESS

CITY

STATE

ZIP

EMAIL ADDRESS

Form 1002A Rev. 2009

NO. 107-23611	(, , , , , , , , , , , , , , , , , , ,	O	OKLAHOMA CORPORATION COMMISSION													
OTC PROD.			Oil & Gas Conservation Division Post Office Box 52000					FEB 1 1 2020								
UNIT NO.	•						Oklahoma Ci			2000		T C	0 1 1	202	.0	
ORIGINAL AMENDED (Reason)							Rule 165:10-3-25				OKLAHOMA CORPORATION					
TYPE OF DRILLING OPERATION						COMPLETION REPORT			,	COMMISSION						
X STRAIGHT HOLE DIRECTIONAL HOLE HORIZONTAL HOLE						SPUD DATE 3-29-19] ·		T:-	640 ACI	es	Т	T	
SERVICE WELL If directional or horizontal, see reverse for bottom hole location.							DRLG FINISHED 4-4-19			-			╁	+	┼—	┼
COUNTY OKFUS		7	/P 12N	RGE 08	3E	DATE	OF WELL	1/27	/2020	1 -				\perp	 	
LEASE	FRI MAN			WELL 2-22			1st PROD DATE NA			1		1				
NE 1/4 SW 1/4 SE 1/4 NW 1/4 FSL OF 5			585	NU.	830	-	OMP DATE			l wL		×				
FI EVATION				1/4 SEC			Longitude			[1			
Derrick FL Ground 847 Latitude (if kn OPERATOR SPESS OIL COMP/							(if known)									
NAME	YANY			RATO		20)57	. I				_	_	\vdash		
ADDRESS 200 S.				DADWAY	ST.				∫ ⊦	+			+-		\vdash	
CITY CLEVELAND				STATE OK ZIP 74020] L		L	OCATE V	VELL		L
COMPLETION TYPE	CASI	CASING & CEMENT (Attach Form 1002C)														
SINGLE ZONE				TYPE	8	IZE	WEIGHT	GRADE		FEET		PSI	SAX		OP OF	СМТ
MULTIPLE ZONE Application Date			CON	DUCTOR												
COMMINGLED Application Date			SURF	ACE	8	5/8	24	J55		745			380		SUR	.F
LOCATION EXCEPTION ORDER NO.			INTE	RMEDIATE												
INCREASED DENSITY ORDER NO.			PROD	DUCTION	5	1/2	15.5	J55		3624			50		3202	2
			LINEF	₹	2	7/8	6.5	J55	surface	3657			50		3,45	0 '
PACKER @BRAND & TYPE			_PLUG	·@		TYPE		PLUG @		TYPE _	* .		TOTAL DEPTH		3,65	7
<u> </u>	D & TYPE		PLUG	~ 	141	TYPE	1/1	PLUG @		TYPE _		_				
COMPLETION & TEST DATA	UNIONVA		a a	4020	<u>1/V</u>	<u>~</u>	<i>[t</i>						. 1			
FORMATION	CROMV							·								
SPACING & SPACING	40 AC/66	31440														
ORDER NUMBER CLASS: Oil, Gas, Dry, Inj,			+													
Disp, Comm Disp, Svc	DRY															
	3635-3	3635-3638														
PERFORATED 3638-3645		+										\dashv				
INTERVALS	3030-3	3030-3045														
ACID/VOLUME	2000	gal														
		gai	7—			-										
FRACTURE TREATMENT (Fluids/Prop Amounts) Nor		00														
(Fluids/Prop Amounts)	1001	-		/				_								-
			1													
		Min Gas Ali		(16	5:10-17	-7)			Purchaser/							
INITIAL TEST DATA		Oil Allowab		(165:10-13-3	;)			First	Sales Date	•						
INITIAL TEST DATE	1/27/20		T													\neg
OIL-BBL/DAY	TRAC	E	1								,		\dashv			
OIL-GRAVITY (API)	NA		+							-			- -			\dashv
GAS-MCF/DAY	TSTI							+								
GAS-OIL RATIO CU FT/BBL	NA.		╁∸					_								
WATER-BBL/DAY	70		+-												-	\dashv
PUMPING OR FLOWING	SWABE	NING	+													\dashv
			+					+					_			
INITIAL SHUT-IN PRESSURE	25PS)I	-			<u> </u>					-					\dashv
CHOKE SIZE			-			<u> </u>							_			
FLOW TUBING PRESSURE						<u> </u>		<u> </u>							<u> </u>	
A record of the formations drille to make this report, which was r	orepared by me or u	nent remarks nder my sup	are preservision a	sented on the and direction,	reverse with the	data a	dare that I have not facts state	ve knowled d herein to	ge of the co	ontents of thi prect, and co	s report	and am a o the bes	uthorized t of my ki	by my nowledg	organiza je and b	ition elief.
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PLEASE TYPE OR USE BLACK INK ONLY FORMATION RECORD **ERDMAN** Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested. WELL NO. LEASE NAME _ NAMES OF FORMATIONS TOP FOR COMMISSION USE ONLY UNION VALLEY-CROMWELL 3,635 NO ITD on file YES TOTAL DEPTH 3.657 DISAPPROVED APPROVED 2) Reject Codes Were open hole logs run? X yes ____no 4/4/2019 Date Last log was run X no at what depths? ___ Was CO₂ encountered? X no at what depths? Was H₂S encountered? Were unusual drilling circumstances encountered? If yes, briefly explain below Other remarks: 640 Acres **BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE** SEC TWP COUNTY RGE Spot Location FWL Feet From 1/4 Sec Lines Measured Total Depth True Vertical Depth BHL From Lease, Unit, or Property Line: **BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)** COUNTY Spot Location Feet From 1/4 Sec Lines FSL FWL Depth of Radius of Turn Direction Total Deviation Measured Total Depth If more than three drainholes are proposed, attach a Length BHL From Lease, Unit, or Property Line: True Vertical Depth 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 LATERAL #2 COUNTY lease or spacing unit. SEC TWP RGE Directional surveys are required for all Spot Location Feet From 1/4 Sec Lines FSL FWL drainholes and directional wells. 1/4 640 Acres Depth of Radius of Turn Direction Total Deviation Length Measured Total Depth True Vertical Depth BHL From Lease, Unit, or Property Line: LATERAL #3 TWP RGE COUNTY Spot Location Feet From 1/4 Sec Lines FSL FWL Radius of Turn Depth of Direction Total Deviation Measured Total Depth Length BHL From Lease, Unit, or Property Line: True Vertical Depth