

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.: 35037281350001

**Completion Report**

Spud Date: December 02, 1989

OTC Prod. Unit No.:

Drilling Finished Date: December 10, 1989

**Amended**

1st Prod Date: January 16, 1990

Amend Reason: CONVERTED TO ENHANCED RECOVERY INJECTION

Completion Date: January 12, 1990

Recomplete Date: January 01, 2020

**Drill Type: STRAIGHT HOLE**

**SERVICE WELL**

Well Name: OLIVE UNIT 1-A

Purchaser/Measurer:

Location: CREEK 22 18N 8E  
NW SE SW NE  
513 FSL 938 FWL of 1/4 SEC  
Derrick Elevation: 875 Ground Elevation: 867

First Sales Date:

Operator: BARNES DARRELL 8153

10015 S 433RD WEST AVE  
DRUMRIGHT, OK 74030-5879

Completion Type		Location Exception		Increased Density	
	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
CONDUCTOR	8 5/8	20		90		90	SURFACE
PRODUCTION	5 1/2	15.5		3324		695	SURFACE

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

**Total Depth: 3324**

Packer		Plug	
Depth	Brand & Type	Depth	Plug Type
2500	ARROW	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
-----------	-----------	----------------	----------------------	----------------	----------------------------	------------------	----------------------	---------------------------------	---------------	-------------------------

There are no Initial Data records to display.

Completion and Test Data by Producing Formation

Formation Name: RED FORKCode: 404RDFKClass: INJ

Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
There are no Spacing Order records to display.		2554	2574
Acid Volumes		Fracture Treatments	
There are no Acid Volume records to display.		There are no Fracture Treatments records to display.	

Formation Name: BARTLESVILLECode: 404BRVLClass: INJ

Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
There are no Spacing Order records to display.		2690	3000
Acid Volumes		Fracture Treatments	
There are no Acid Volume records to display.		There are no Fracture Treatments records to display.	

Formation	Top
-----------	-----

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

Other Remarks
OCC - UIC PERMIT NUMBER 1902220022

FOR COMMISSION USE ONLY	
Status: Accepted	1144913

API NO. 037-28135  
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

MAR 12 2020

☒ ORIGINAL  
☒ AMENDED (Reason)

CONVERTED TO ENHANCED  
RECOVERY 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	CREEK	SEC	22	TWP	18N	RGE	08E	SPUD DATE	12-2-1989
LEASE NAME	OLIVE UNIT			WELL NO.	1A			DRLG FINISHED DATE	12-10-1989
NW 1/4 SE 1/4 SW 1/4 NE 1/4				FSL OF 1/4 SEC	513	FWL OF 1/4 SEC	938	DATE OF WELL COMPLETION	1-12-1990
ELEVATION Derrick FL	875	Ground	867	Latitude (if known)				1st PROD DATE	1-16-1990
OPERATOR NAME	DARRELL BARNES			OTC / OCC OPERATOR NO.	8153				
ADDRESS	10015 S. 433RD WEST AVE.								
CITY	DRUMRIGHT	STATE	OK	ZIP	74030				

Original 1002A OKLAHOMA CORPORATION COMMISSION


LOCATE WELL

COMPLETION TYPE

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

CASING & CEMENT (Attach Form 1002C)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR	8 5/8	20lbs		90ft		90	surface
SURFACE							
INTERMEDIATE							
PRODUCTION	5 1/2	15.5		3324ft		695	surface
LINER							

PACKER @ 2500ft BRAND & TYPE ARROW PLUG @ TYPE PLUG @ TYPE  
PACKER @ BRAND & TYPE PLUG @ TYPE PLUG @ TYPE

TOTAL DEPTH 3324ft

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	REDFORK & BARTLESVILLE	404RDFK 404BRVL
SPACING & SPACING	NONE	Bartlesville
ORDER NUMBER		
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	INJECTION	Injection
PERFORATED INTERVALS	2554-3000ft 2574	2690-3000
ACID/VOLUME		
FRACTURE TREATMENT (Fluids/Prop Amounts)	WIG PERMIT NO. 1902220022	see remarks

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				

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.

DARRELL BARNES

3/9/2020

(918)352-2308

SIGNATURE

NAME (PRINT OR TYPE)

DATE

PHONE NUMBER

10015 S 433RD WEST AVE

DRUMRIGHT

OK

74030

Tibarnes20@aol.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.

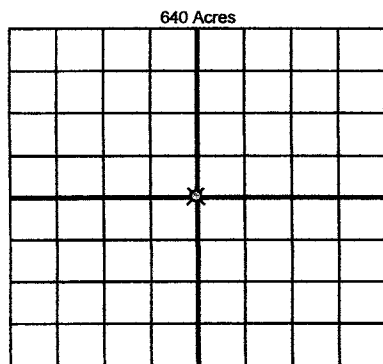
NAMES OF FORMATIONS	TOP
ENHANCED RECOVERY INJECTION WELL	
PERMIT APPLICATION NO. 1902220022	
APPLICATION APPROVAL DATE 8/12/2018	
UIC PERMIT NO. 1902220022	
OLIVE UNIT 1A WELL	

LEASE NAME OLIVE UNITWELL NO. 1A

FOR COMMISSION USE ONLY	
ITD on file <input type="checkbox"/> YES <input type="checkbox"/> NO	
APPROVED <input type="checkbox"/> DISAPPROVED <input type="checkbox"/>	2) Reject Codes

Were open hole logs run?	<input type="checkbox"/> yes <input type="checkbox"/> no
Date Last log was run	
Was CO <sub>2</sub> encountered?	<input type="checkbox"/> yes <input type="checkbox"/> no at what depths?
Was H <sub>2</sub> S encountered?	<input type="checkbox"/> yes <input type="checkbox"/> no at what depths?
Were unusual drilling circumstances encountered?	<input type="checkbox"/> yes <input type="checkbox"/> no
If yes, briefly explain below	

Other remarks:

OCC - UIC - permit 1902220022

## 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:

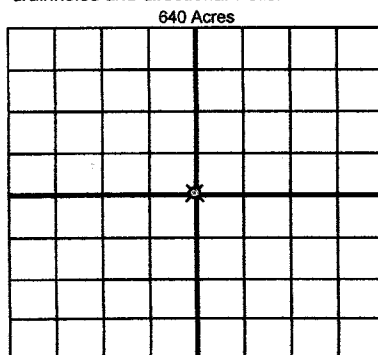
## LATERAL #3

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:

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.



10A. DISC Oper No  
12025-0  
1 API Number  
037-28135  
2 OTC Prod. Unit No

This form is an Original ☒ Amended ☐

OKLAHOMA CORPORATION COMMISSION  
OIL AND GAS CONSERVATION DIVISION  
Jim Thorpe Building / Oklahoma City, Oklahoma 73105-4993

PLEASE TYPE OR USE BLACK INK ONLY

3 County Okfuskee Sect 22 Twp 18N Range 8E  
4 Lease Name Okfuskee Unit 5. Well No 1A  
7. Well Located SE 4 SW 4 NE 4  
8 513 Ft From S L of 4 Sect. and 938 Ft. From W.L. of 4 Sect. X  
9. Elevation Derrick Floor 875 Ground 867  
10 COMPANY OPERATING Flat Energy, Inc.  
Address Box 1111

640 Acres  
6. Locate Well  
And Outline Lease

City Dumont State OK Zip 74030

11. Drilling Started 12-2, 1989 Drilling Finished 12-10, 1989  
12. Well Completed 1-12, 1990 Date-First Prod. 1-16, 1990

13. TYPE COMPLETION

Single Zone Redford Order No \_\_\_\_\_  
Multiple Zone \_\_\_\_\_ Order No \_\_\_\_\_  
Commingled \_\_\_\_\_ Order No \_\_\_\_\_  
LOCATION EXCEPTION \_\_\_\_\_ Order No \_\_\_\_\_  
INCREASED DENSITY \_\_\_\_\_ Order No \_\_\_\_\_

14. Penalty \_\_\_\_\_

15 OIL OR GAS ZONES

Name	From	To	Name	From	To
<u>Redford</u>	<u>2554</u>	<u>2574</u>			

16 CASING & CEMENT

Surf & Prod. Casing Set			Csg Test		
Type	Size	Weight	Grade	Feet	PSI
Conductor					
Surface	<u>8 7/8</u>	<u>20</u>		<u>90</u>	<u>90</u>
Intermediate					
Production	<u>5 1/2</u>	<u>15.50</u>		<u>3324</u>	<u>695</u>
Liner					

18. PACKERS SET  
Depth \_\_\_\_\_ Type \_\_\_\_\_  
17. TOTAL DEPTH 3324

(Over)

Why?

19 COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION 444 RDEK 1 2006881  
SPACING & SPACING ORDER NUMBER NONE  
CLASSIFICATION (Oil, Gas, Dry, Inj Well) Oil  
PERFORATED 2554-60  
INTERVALS 2562-66  
2570-74  
ACID/VOLUME 250 gal.  
FRACTURE TREATED? Yes  
Fluids Amounts 7000 # sand 12,000 gal. Red Water

INITIAL TEST DATA

Date 1-16-90  
Oil-bbl/day 714  
Oil-Gravity (\*API) Not measurable  
Gas-MCF/day 100 bbl.  
Gas-Oil Ratio Cu Ft/bbl Pumping  
Water-bbl/day 0  
Pumping or Flowing 0  
Initial Shut-In Pressure 0  
CHOKE SIZE 0  
FLOW TUBING PRESSURE 0

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 Charles H. Platt Title President  
Box 1111 Address Dumont OK 74030 City Dumont State OK Zip 74030  
Date 1-18-90 Phone 918-352-2749

22 LEASE NAME

23. h. NO

PLEASE PRINT OR USE BLACK INK ONLY  
 (RULE 3-205) FORMATION RECORD

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

COMMISSION

24

NAMES OF FORMATIONS	TOP	BOTTOM	FOR COMMISSION USE ONLY
Hogshooter	1238	1262	<p>Well Completion Report Checklist</p> <p>APPROVED <u>LSH</u> DISAPPROVED _____</p> <p>1) ITD Section            a) No Intent to Drill on file            (1) Send warning letter            (2) Recommend for contempt <input type="checkbox"/></p> <p>2) Authorized Surety            a) No Surety filed            b) Expired Surety _____</p> <p>Financial Statement/Letter of Credit/Bond _____</p> <p>3) Spacing and Pooling _____</p> <p>4) Well Spudded prior to approval _____</p> <p>5) Insufficient surface casing required _____ set</p> <p>6) No test data _____</p> <p>7) Change of location _____</p> <p>8) Well location "off pattern"            Spacing Order No _____            Size Unit/pattern _____            Formation(s) _____</p> <p>9) No record found _____</p> <p>10) Other _____</p> <p>(Please specify appropriate number from Initial rejection letter or other problem found)</p> <p>11) Status _____</p>
Upper Layton	1306	1325	
Osweyo	2154	2192	
True - absent			
Skinner	2430	2440	
Redfork	2554	2574	
Barksville	2690	2790	
Miss Lime	3034	3260	
Viola	3286	3290	
Wilcox	3324	3334	
TOTAL DEPTH			

Was an electrical survey run? X YES NO Date last log was run 12-9-89

Was CO<sub>2</sub> encountered? X YES NO If so, at what depth(s) \_\_\_\_\_

Was H<sub>2</sub>S encountered? X YES NO If so, at what depth(s) \_\_\_\_\_

25 Direct Survey True Vertical Depth. \_\_\_\_\_ 26. Horizontal Projections. \_\_\_\_\_ (N/S) \_\_\_\_\_ (E/W)

27 Were unusual drilling circumstances encountered? Yes \_\_\_\_\_ No X If yes, briefly explain: \_\_\_\_\_

Other Remarks 189000