

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.: 35037294730000

Completion Report

Spud Date: May 18, 2021

OTC Prod. Unit No.:

Drilling Finished Date: May 21, 2021

1st Prod Date: August 15, 2021

Completion Date: August 03, 2021

Drill Type: STRAIGHT HOLE

Well Name: GENERAL LEE 3

Purchaser/Measurer:

Location: CREEK 27 15N 10E
SW SE NW NE
1140 FNL 1685 FEL of 1/4 SEC
Derrick Elevation: 0 Ground Elevation: 765

First Sales Date:

Operator: WFD OIL CORPORATION 17501

16800 CONIFER LN
EDMOND, OK 73012-0619

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		7	23	NEW	320		85	SURFACE
PRODUCTION		4 1/2	11.5	NEW	3154		90	1850

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

Total Depth: 3175

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
Jul 30, 2021	MISENER	5	40			25	PUMPING			

Completion and Test Data by Producing Formation			
Formation Name: MISENER		Code: 319MSNR	Class: OIL
Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
NOT SPACED		3047	3050
Acid Volumes		Fracture Treatments	
200 GALLONS		There are no Fracture Treatments records to display.	

Formation	Top
SKINNER	1942
BARTLESVILLE	2120
DUTCHER	2570
MISENER	3047
VIOLA	3089
WILCOX	3122

Were open hole logs run? Yes
Date last log run: June 15, 2021

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY	
Status: Accepted	1146937



Form 1002A
Rev. 2009

API NO. 03729473
OTC PROD. UNIT NO.

<input checked="" type="checkbox"/> ORIGINAL		WELL COMPLETION REPORT	
AMENDED (Reason)		OAC 185:10-3-25	
TYPE OF DRILLING OPERATION		(PI)	
<input checked="" type="checkbox"/> STRAIGHT HOLE <input type="checkbox"/> DIRECTIONAL HOLE <input type="checkbox"/> HORIZONTAL HOLE		SPUD DATE 5/18/21	
<input type="checkbox"/> SERVICE WELL		DRLOG FINISHED DATE 5-21-2021	
If directional or horizontal, see reverse for bottom hole location.			
COUNTY CREEK	SEC 27	TWP 15N	RGE 10E
LEASE GENERAL		WELL NO. 3	DATE OF WELL COMPLETION 8/3/21
NAME SEA Lee	ENL 1140	DATE OF 3 FEB	1st PROD DATE 8/15/21
SW 1/4 SE 1/4 NW 1/4 NE 1/4	SEC 1500	1/4 SEC 955	RECOMP DATE
ELEVATION Derrick FL	Ground 765	Latitude (if known) 1685	Longitude (if known)
OPERATOR NAME WFD OIL CORP.	OTC / OCC OPERATOR NO. 17501		
ADDRESS 16800 COLLIER LANE			
CITY EDMONDO	STATE OK	ZIP 73012	

840 Acres

W

LOCATE WELL

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

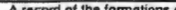
CASING & CEMENT (Attach Form 1002C)							
TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	7	23	NEW	320		85	surface
INTERMEDIATE							
PRODUCTION	4 1/2	11.5	NEW	3134		90	1850
LINER							
PLUG @	TYPE	PLUG @	TYPE	TOTAL DEPTH		3175	

PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION						
FORMATION	Misener					No Frac
SPACING & SPACING	N/S					
ORDER NUMBER						
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	OIL					
	3047-50					
PERFORATED INTERVALS						
ACID/VOLUME	200 gals					
FRACTURE TREATMENT (Fluids/Prop Amounts)						

		Min Gas Allowable OR Oil Allowable	(165:10-17-7) (165:10-13-3)	Gas Purchaser/Measurer First Sales Date			
INITIAL TEST DATA							
INITIAL TEST DATE	7/30/2021						
OIL-BBL/DAY	5						
OIL-GRAVITY (API)	40						
GAS-MCF/DAY	TSTM						
GAS-OIL RATIO CU FT/BBL							
WATER-BBL/DAY	25						
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	NAME (PRINT OR TYPE)	DATE	PHONE NUMBER
 16800 Conifer Lane	W F DOST JR Edmond OK 73012	Bldg. wfd drc@net.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.

NAMES OF FORMATIONS	TOP
SKINNER	1942
BARTLESVILLE	2120
DUTCHER	2570
WISNER	3047
VIOLA	3089
WILCOX	3122

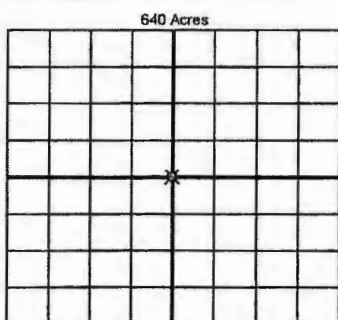
LEASE NAME Gen Lee

WELL NO. 3

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 checked="" type="checkbox"/> yes <input type="checkbox"/> no
Date last log was run	<u>6/15/2021</u>
Was CO ₂ encountered?	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no at what depths? _____
Was H ₂ S encountered?	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no at what depths? _____
Were unusual drilling circumstances encountered?	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
If yes, briefly explain below	

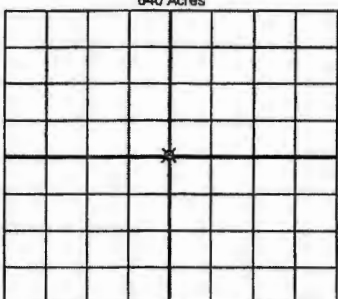
Other remarks:



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: