

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.: 35037203830001

Completion Report

Spud Date: October 05, 1967

OTC Prod. Unit No.:

Drilling Finished Date: October 08, 1967

Amended

1st Prod Date: October 28, 1967

Amend Reason: RUN LINER / CHANGE WELL NAME

Completion Date: October 28, 1967

Recomplete Date: August 14, 2019

Drill Type: STRAIGHT HOLE

Well Name: CRFSU (COTTONWOOD 9-11) 9-11

Purchaser/Measurer:

Location: CREEK 35 19N 8E
C NW SW SW
990 FSL 330 FWL of 1/4 SEC
Derrick Elevation: 928 Ground Elevation: 922

First Sales Date:

Operator: LEG UP OPERATING COMPANY LLC 22892

11717 S VINE ST
JENKS, OK 74037-4343

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	8 5/8			401		215	SURFACE
PRODUCTION	5 1/2			2667		50	

Liner								
Type	Size	Weight	Grade	Length	PSI	SAX	Top Depth	Bottom Depth
LINER	4 1/2			2564	0	45	SURFACE	2564

Total Depth: 2675

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
Sep 01, 2019	RED FORK	8	36			22	PUMPING			

Completion and Test Data by Producing Formation			
Formation Name: RED FORK		Code: 404RDFK	Class: OIL
Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
65881	UNIT	2602	2623
Acid Volumes		Fracture Treatments	
There are no Acid Volume records to display.		There are no Fracture Treatments records to display.	

Formation	Top
SEE ORIGINAL 1002A	0

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

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY	
Status: Accepted	1144445

RECEIVED

DEC 19 2019

Form 1002A
Rev. 2009

API NO. **03720383**
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

OKLAHOMA CORPORATION COMMISSION

☒ ORIGINAL
☐ AMENDED (Reason)

RUNLINE / Change Well Name

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 **35** T **19N** R **8E**
LEASE NAME **CREEFSU** WELL NO. **9-11**
NW 1/4 SW 1/4 SW 1/4 1/4 FSL OF 1/4 SEC **990** FWL OF 1/4 SEC **330**
ELEVATION **928** Ground **922** Latitude (if known) Longitude (if known)
OPERATOR NAME **LEG D OPERATING CO LLC** OTC/OCC OPERATOR NO. **22892**
ADDRESS **11717 S. VINE ST**
CITY **JENKS** STATE **OK** ZIP **74037**

SPUD DATE **10.5.67**
DRLG FINISHED DATE **10.8.67**
DATE OF WELL COMPLETION **10.28.67**
1st PROD DATE **10.28.67**
RECOMP DATE **8-14-2019**

640 Acres

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	8 5/8			401		215	SURFACE
INTERMEDIATE							
PRODUCTION	5 1/2			21607		50	
LINER	4 1/2			2564		145	SURFACE
						TOTAL DEPTH	2675

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

PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____
PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION

404 RDEK

FORMATION	RED FORK						
SPACING & SPACING ORDER NUMBER	UNIT 65881						
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	OIL						
PERFORATED INTERVALS	2602-2623						
ACID/VOLUME							
FRACTURE TREATMENT (Fluids/Prop Amounts)							

☐ 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	09.01.19						
OIL-BBL/DAY	8						
OIL-GRAVITY (API)	36						
GAS-MCF/DAY							
GAS-OIL RATIO CU FT/BBL							
WATER-BBL/DAY	22						
PUMPING OR FLOWING	Pumping						
INITIAL SHUT-IN PRESSURE	NOT NEEDED						
CHOKE SIZE	—						
FLOW TUBING PRESSURE	—						

AS SUBMITTED

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 **PAUL SCHULTZ** NAME (PRINT OR TYPE) **PAUL SCHULTZ** DATE **12.06.19** PHONE NUMBER **661-316-8255**
ADDRESS **11717 S VINE ST** CITY **JENKS** STATE **OK** ZIP **74037** EMAIL ADDRESS **COTTONWOODLEASE2016@gmail.com**

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
<p>SEE ORIGINAL 1002A</p>	

PLEASE NAME

WELL NO.

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

Were open hole logs run? ☐ yes ☐ no

Date Last log was run _____

Was CO₂ encountered? ☐ yes ☐ no at what depths? _____

Was H₂S encountered? ☐ yes ☐ no at what depths? _____

Were unusual drilling circumstances encountered? ☐ yes ☐ 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.

640 Acres



BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

SEC	TWP	RGE	COUNTY			
Spot Location			Feet From 1/4 Sec Lines		FSL	FWL
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

CATERAL #1									
SEC		TWP		RGE		COUNTY			
Spot Location						Feet From 1/4 Sec Lines		FSL	FWL
1/4		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:			

LATERAL #2

LATERAL #2									
SEC	TWP	RGE	COUNTY						
Spot Location				Feet From 1/4 Sec Lines		FSL		FWL	
1/4		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:					

LATERAL #3

LATERAL #3						
SEC	TWP	RGE	COUNTY			
Spot Location			Feet From 1/4 Sec Lines		FSL	FWL
1/4	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:			