Oklahoma Corporation Commission Oil & Gas Conservation Division Post Office Box 52000 Oklahoma City, Oklahoma 73152-2000 Rule 165: 10-3-25

Completion Report

API No.: 35087201870003

OTC Prod. Unit No.: 087-43933

Amended

Amend Reason: LOST THE WELL - IN RECOMPLETION PROCESS

Drill Type: STRAIGHT HOLE

Well Name: OLLIE SMITH 1-8

Location: MCCLAIN 8 5N 4W NW SW NE SE 1740 FSL 1600 FWL of 1/4 SEC Latitude: 34.91804 Longitude: -97.63855 Derrick Elevation: 1073 Ground Elevation: 1054

Operator: RUFFEL LANCE OIL & GAS LLC 15459

210 PARK AVE STE 2150 OKLAHOMA CITY, OK 73102-5632

Spud Date: April 02, 1971 Drilling Finished Date: June 09, 1971 1st Prod Date: June 23, 1971 Completion Date: July 15, 1971 Recomplete Date: October 13, 2020

Purchaser/Measurer:

First Sales Date:

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		

				С	asing and Cer	nent				
1	уре		Size	Weight	Grade	Fe	et	PSI	SAX	Top of CMT
CON	OUCTOR		16			8	7		175	
SUI	RFACE		13 3/8	48	H-40	H-40 207		100		
INTER	MEDIATE		9 5/8	32.30	H-40	H-40 2017			600	
PROE	PRODUCTION 5 1/2		17	K-55	K-55 12957			275		
					Liner					
Туре	Size	Wei	ght	Grade	Length	PSI	SAX	Тор	Depth	Bottom Depth
	1		I	There are	no Liner record	ds to displa	ay.	1		1

Total Depth: 12849

Brand & Type
PACKER

PI	ug
Depth	Plug Type
12482	RBP
12688	CIBP

					I	Initial Tes	at Data					
Test Date	Forma	tion	Oil BBL/Day		Oil-Gravity (API) M ⁱ		y Cu FT/BBL BBL/Day Flowing		Initial Shut- In Pressure	Choke Size	Flow Tubir Pressure	
				There	are no	Initial Data	a records to disp	olay.				
			Cor	mpletior	n and T	est Data k	by Producing F	ormation				
Formation Name: BROMIDE Con					Code: 20	2BRMD	C	lass: DRY				
Spacing Orders						Perforated I	ntervals					
Orde	er No	Un	it Size			Fron	rom To					
704	445		160			1264	2	12636				
778	820	1	NPT			1266	12664 12656					
	Acid V	olumes					Fracture Tre	atments		7		
There a	are no Acid Volu	ume records to	o display.		The	ere are no	Fracture Treatr	nents record	s to display.			
Formation			т	ор		1	Vere open hole l	ogs run? Ve	e			
SEE ORIGINA	L 1002A					Were open hole logs run? Yes 0 Date last log run:						
							Vere unusual dri Explanation:	lling circums	tances encou	untered? No		
Other Remark												

ABANDONED OCTOBER 13, 2020, DUE TO CASING COLLAPSED @ 5,794' OCC - CORRECT LAST SPOT CALL TO NW.

FOR COMMISSION USE ONLY

Status: Accepted

1146191

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Der 1. 102 Der 4. 1932 Der 1. 1932	INU.		BLACK	INK ONLY		ок	LAHOMA CO	RPORATIO	ON COMMISSION		E		0 2021	
Display <			i 1002A	if recomplet	ion or reentry		Oli & Gas Post	Conservati Office Box	lon Division 52000	_				
All manual mode Description Mode Service Mode Servic		Lost	Lost the Well - In Recompletion Rule 165:10-3-25 COMPLETION REPORT							0				
Bernord Vetul. BRUE PRIVE DRUE PRIVE DRU						SPUD	DATE	4/2/*	1971			640 Acre	8	1
DOWNY McGglialin less 8 more 5N loss 4W DMTE SWELT 7/15/1971 AMAE Ollie Smith Mol. 1.4.8 Market 0/22/1971 Market 0/22/1971 MARE Ollie Smith Mol. 1.4.8 Market 0/22/1971 Market 0/22/1971 MARE Diverse 1073 Genut 1004 (minute) -97.838565 Diverse 210 PARK AVENUE, SUITE 2150 OK pm 73102 DOMESS 210 PARK AVENUE, SUITE 2150 -97.8120 -06.810.42 Market 2006 Market 10 from 0526 meth battabate) -06.810.42 -07.012 SINGE 2006 Market 9-56° 32.304 H-40 20.71 <i>UpO ot other</i> Conserver Pulo 6 12.482' mr 17.95 -0.97 -0.90 Starter 4 5.58° 32.304 H-40 20.71 <i>UpO other</i> Conserver Pulo 6 12.482' mr -17.5 -0.97 -0.97 Starter 4 5.88° 7172 17.95 -0.97 -0.97 -0.97 <	SERVICE WELL			ionizonniz				6/9/	1971					+
BASE Other Smith Well 1-8 tele PRODuct 6/23/1971 NM in SW via NE in SE inf Pres. TAO Masce File TAO File F				TWP 5N	RGE 4W	DATE	OF WELL	7/15/	/1971			<u></u>		
NUM IA SW 14 NE 14 SE 14 F8L 1740 FML0F 1600 BECOME DATE 10/13/2020 NUM IA SW 14 NE 14 SE 14 Intervent 1054 Landard Immeni 34.91804 FERONATION -97.63855 SPRATUR LANCE RUFFEL OIL & GAS LLO OFFICIONE OFFERATOR NO. 15459-0 -97.63855 -97.63855 -97.63855 SIMU IANDER SOME 210 PARK AVENUE, SUITE 2150 -97.63855 -97.102 -97.63855 SIMU IANDER SOME CALAHOMA CITY ISTARE OK 22 mod 18459-0 -97.63855 SIMU IANDER SOME CALAHOMA CITY ISTARE OK 22 mod 18459-0 -97.63855 SIMU IANDER SOME CALAHOMA CITY ISTARE OK 22 mod 18459-0 -97.102 SIMU IANDER SOME CALAHOMA CITY ISTARE OK 29.710 -75.5 SIMU IANDER SOME SIMU IANDER SOME SIMU IANDER SOME -96.56" 22.08 12.6807 12.6817 12.6817 12.6817 12.6827 17.75 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 -75.5 <t< td=""><td></td><td>Ollie Smith</td><td></td><td></td><td>1-8</td><td></td><td></td><td>6/23/</td><td>/1971</td><td></td><td></td><td>\downarrow</td><td></td><td></td></t<>		Ollie Smith			1-8			6/23/	/1971			\downarrow		
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FORMATION -Viola Ist Bromide SPACING & SPACING 77820 & 70445 (160A)	PACKER	ND & TYPE			<u>12,688'</u> 12 <u>,482'</u>	TYPE	RBP				······		12,	849'
Min Gas Allowable (185:10-17-7) Gas Purchaser/Measurer First Sales Data OII Allowable (185:10-13-3)						1	2 DRI	$\frac{np}{1}$	i					
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Image: Second	ORDER NUMBER CLASS: Oli, Gas, Dry, Inj,	77820 8704451 NPT	160AJ	77820 &7 <u>NPT</u>	0445[1604	¥							<u>.</u>	
INTERVALS	Disp, Comm Disp, Svc			.12,664	7 -12;656 ¹									
ACID/VOLUME FRACTURE TREATMENT FRACTURE TREA	PERFORATED INTERVALS			12,642	- 12,636'									
FRACTURE TREATMENT				12,664'	- 12,656'									
(Fluids/Prop Amounts) Min Gas Allowable (165:10-17-7) Gas Purchaser/Measurer INITIAL TEST DATA OII Allowable (165:10-17-7) Gas Purchaser/Measurer INITIAL TEST DATA OII Allowable (165:10-13-3) INITIAL TEST DATE Image: Comparison of the comparison of	ACID/VOLUME									_				
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X OR First Sales Date INITIAL TEST DATA Oll Allowable (166:10-13-3) INITIAL TEST DATE Image: Constraint of the constraint o	(Fluids/Prop Amounts)							_	····	-			· · · · · · · · · · · · · · · · · · ·	
INITIAL TEST DATE OIL-BBL/DAY OIL-BBL/DAY OIL-GRAVITY (API) GAS-MCF/DAY GAS-MCF/DAY GAS-OIL RATIO CU FT/BBL WATER-BBL/DAY PUMPING OR FLOWING INITIAL SHUT-IN PRESSURE CHOKE SIZE FLOW TUBING PRESSURE FLOW TUBING PRESSURE A record of the formations drilled through, and pertinant 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 propared of 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 bellef. SIGNATURE NAME (PRINT OR TYPE) DATE PHONE NUMBER		X	OR			 7)				er		 		
OIL-GRAVITY (API)	INITIAL TEST DATA			(100;10					·					
GAS-MCF/DAY GAS-OL RATIO CU FT/BEL GAS-OL RATIO CU FT/BEL Image: Comparison of the co	OIL-BBL/DAY									_				
GAS-OIL RATIO CU FT/BBL	OIL-GRAVITY (API) GAS-MCF/DAY													
PUMPING OR FLOWING Imit and the second of the formations drilled through, and pertinant 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 propared forme 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 bellef. A record of the formations drilled through, and pertinant 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 propared forme 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 bellef. Marceller LANCE RUFFEL Marceller 405/239-7036 Stennaturing NAME (PRINT OR TYPE) DATE PHONE NUMBER	GAS-OIL RATIO CU FT/BBL													
INITIAL SHUT-IN PRESSURE CHOKE SIZE FLOW TUBING PRESSURE FLOW TUBING PRESSURE A record of the formations drilled through, and pertinant 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 propared of 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 bellef. LANCE RUFFEL 405/239-7036 SIGNATURE NAME (PRINT OR TYPE) DATE PHONE NUMBER	WATER-BBL/DAY													
CHOKE SIZE FLOW TUBING PRESSURE FLOW TUBING PRESSURE Ideclare that I have knowledge of the contents of this report, which was propared by my organization to make this report, which was propared 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 bellef. A record of the formations drilled through, and pertinant remarks are presented on the reverse. I declare that I have knowledge of the contents of this report, which was propared by my organization to make this report, which was propared by my organization. A record of the formations drilled through, and pertinant remarks are presented on the reverse. I declare that I have knowledge of the contents of this report, which was propared by my organization. A record of the formations drilled through, and pertinant remarks are presented on the reverse. I declare that I have knowledge of the contents of this report, which was propared by my organization. A record of the formations drilled through and pertinant remarks are presented on the reverse. I declare that I have knowledge of the contents of this report, which was propared by my organization. A record of the formations drilled through and pertinant remarks are presented on the reverse. I declare that I have knowledge of the contents of this report, which was propared by my organization. A record of the formations drilled through and direction, with the data and facts stated herein to be true, correct, and complete to the best of my knowledge and bellef. A record of the formation drilled through and therein to be true and thereto drilled therein to be true. A						+								
A record of the formations drilled through, and pertinant 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 propared of 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 bellef. LANCE RUFFEL 405/239-7036 SIGNATURE NAME (PRINT OR TYPE) DATE PHONE NUMBER	CHOKE SIZE													
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. LANCE RUFFEL 405/239-7036 SIGNATURE NAME (PRINT OR TYPE) DATE	FLOW TUBING PRESSURE													
	to make this report, which we	as prepared by me or und	int reman er my su	ks are present pervision and o	firection, with the LAI	NCE F	and facts state RUFFEL	ad herein to	ige of the contents of be true, correct, an	of this rep id comple		est of my Kr	405/239	-7036
		11	 				•				DATE		PHONE NU	JMBER

PLEASE TYPE OR USE BLACK INK ONLY FORMATION RECORD Give formation names and lops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

Date Last log was run Was CO ₂ encountered?	OR COMMISSION USE ONLY
Date Last log was run Was CO ₂ encountered?ye Was H ₂ S encountered?ye	2) Reject Codes
Date Last log was run Was CO ₂ encountered?ye Was H ₂ S encountered?ye	
Date Last log was run Was CO ₂ encountered?ye Was H ₂ S encountered?ye	
Was H ₂ S encountered?ye	s no s no at what depths?
	s no at what depths?
If yes, briefly explain below	

LEASE NAME

WELL NO.

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

	_	0101	10100	 	
 	_			 	
-					

BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

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

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)

SEC	TWP		RGE	COUNTY	:	Seminole		
Spot Location 1/4		1/4	1/4		4 Feet From 1/4 Sec Lines	FSL	FWL	
Depth of Deviation			Radius of Turn		Direction	Total Length		
Measured Total Dep	plh		True Vertical De	epth	BHL From Lease, Unit, or Property Line:			

LATERAL #2	
SEC	

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

LATERAL #3								
SEC	TWP	RGE		ŤΥ				
Spot Location	/4	 1/4	1/4	1/4	Feet From 1/4 Sec Lines	FSL	FWL	
Depth of Deviation			us of Tum		Direction	Total Length	<u>1</u>	
Measured Total	l Depth	True	Vertical Depth		BHL From Lease, Unit, or Pr	operty Line:		

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