

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.: 35019262530001

Completion Report

Spud Date: October 15, 2020

OTC Prod. Unit No.: 019-028650-0-0000

Drilling Finished Date: October 16, 2020

1st Prod Date: February 06, 2021

Completion Date: February 05, 2021

Drill Type: STRAIGHT HOLE

Well Name: OIL CITY UNIT 58

Purchaser/Measurer:

Location: CARTER 27 3S 2W
NW NW SE NW
1155 FSL 1485 FWL of 1/4 SEC
Derrick Elevation: 1048 Ground Elevation: 1043

First Sales Date:

Operator: KODIAK OIL & GAS INC 23226

204 N WALNUT ST
MUENSTER, TX 76252-2766

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
PRODUCTION	5 1/2	17	J	1203		180	SURFACE

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

Total Depth: 1215

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
Feb 08, 2021	PONTOTOC	6	21			32	PUMPING	40	0	

Completion and Test Data by Producing Formation										
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Formation Name: PONTOTOC		Code: 419PNTC	Class: OIL
Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
47075	UNIT	878	884
67235	UNIT	1004	1034
Acid Volumes		Fracture Treatments	
There are no Acid Volume records to display.		There are no Fracture Treatments records to display.	

Formation	Top
PONTOTOC	850

Were open hole logs run? Yes
Date last log run: October 13, 2020

Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY	
Status: Accepted	1146133

API NO. 35-019-26253
OTC PROD. UNIT NO. 019-028650

Oil and Gas Conservation Division
P.O. Box 52000
Oklahoma City, OK 73152-2000
405-522-0577
OCCentralProcessing@OCC.OK.GOV



OKLAHOMA
Corporation
Commission

Received
2-10-21
DKN

Form 1002A
Rev. 2020

ORIGINAL
AMENDED (Reason)

PERMIT EXPIRED

Rule 185:10-3-25

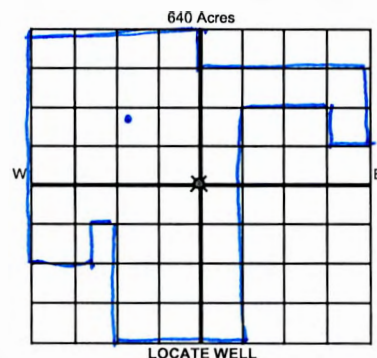
COMPLETION REPORT

TYPE OF DRILLING OPERATION

☒ STRAIGHT HOLE ☐ DIRECTIONAL HOLE ☐ HORIZONTAL HOLE
☐ SERVICE WELL

If directional or horizontal, see reverse for bottom hole location.

COUNTY	CARTER	SEC	27	TWP	3S	RGE	2W	SPUD DATE	10-15-2020
LEASE NAME	OIL CITY UNIT			WELL NO.	58	DATE OF WELL COMPLETION	02/05/2021	DRLG FINISHED DATE	10-16-2020
NW 1/4 NW 1/4 SE 1/4 NW 1/4	FSL 1155			FWL 1485	1st PROD DATE		02/06/2021	RECOMP DATE	
ELEVATION	1048	Ground	1043	Latitude	Longitude				
OPERATOR NAME	KODIAK OIL & GAS, INC				OTC / OCC OPERATOR NO.	23226			
ADDRESS	204 N WALNUT ST								
CITY	MUENSTER			STATE	TX	ZIP	76252		



COMPLETION TYPE

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

CASING & CEMENT (Attach Form 1002C)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE							
INTERMEDIATE							
PRODUCTION	5 1/2	17#	J	1203		180	SURFACE
LINER							

PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____ TOTAL DEPTH 1215
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	PONTOTOC						No Frac
SPACING & SPACING ORDER NUMBER (unit)	47075 & 67235 (unit)						
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	Oil						
PERFORATED INTERVALS	878-884 1004-1034						
ACID/VOLUME	none						
FRACTURE TREATMENT (Fluids/Prop Amounts)	none						

Min Gas Allowable (165:10-17-7)

OR

Oil Allowable (165:10-13-3)

Purchaser/Measurer

First Sales Date

INITIAL TEST DATA

INITIAL TEST DATE	2/8/2021					
OIL-BBL/DAY	6					
OIL-GRAVITY (API)	21					
GAS-MCF/DAY	0					
GAS-OIL RATIO CU FT/BBL	0					
WATER-BBL/DAY	32					
PUMPING OR FLOWING	PUMPING					
INITIAL SHUT-IN PRESSURE	40					
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	MEL WALTERSCHEID	DATE	2/8/2021	PHONE NUMBER	940-759-4001
204 N WALNUT ST	MUENSTER TX 76252	WFW@NTIN.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.

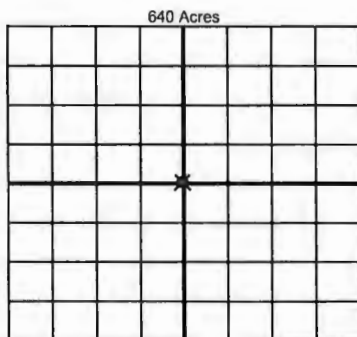
NAMES OF FORMATIONS	TOP
PONTOTOC	850

LEASE NAME _____ OIL CITY UNIT _____ WELL NO. 58

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

Were open hole logs run?	<input checked="" type="radio"/> yes <input type="radio"/> no
Date Last log was run	10/13/2020
Was CO ₂ encountered?	<input type="radio"/> yes <input checked="" type="radio"/> no at what depths? _____
Was H ₂ S encountered?	<input type="radio"/> yes <input checked="" type="radio"/> no at what depths? _____
Were unusual drilling circumstances encountered?	<input type="radio"/> yes <input checked="" type="radio"/> no
If yes, briefly explain below	

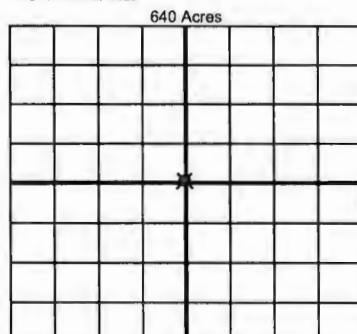
Other remarks:



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
1/4	1/4	1/4	1/4
Measured Total Depth		True Vertical Depth	Feet From 1/4 Sec Lines
BHL From Lease, Unit, or Property Line:			

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)

LATERAL #1			
SEC	TWP	RGE	COUNTY
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			
SEC	TWP	RGE	COUNTY
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			
SEC	TWP	RGE	COUNTY
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:	