

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.: 35075220290002

Completion Report

Spud Date: March 04, 2017

OTC Prod. Unit No.:

Drilling Finished Date: March 05, 2017

1st Prod Date: August 05, 2017

Completion Date: August 04, 2017

Drill Type: STRAIGHT HOLE

Well Name: BURTON 103

Purchaser/Measurer:

Location: KIOWA 31 6N 16W
SE NW SE NE
760 FSL 1758 FWL of 1/4 SEC
Derrick Elevation: 0 Ground Elevation: 0

First Sales Date:

Operator: LAWTON BROTHERS INC 24345

1861 BROWN BLVD UNIT 217-631
ARLINGTON, TX 76006-4618

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	950	J-55	100		60	SURFACE
PRODUCTION	4 1/2			456		80	SURFACE

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

Total Depth: 456

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
Aug 05, 2017	HUNTON	21	32			10	PUMPING	20	N/A	

Completion and Test Data by Producing Formation			
Formation Name: HUNTON		Code: 269HNTN	Class: OIL
Spacing Orders		Perforated Intervals	
Order No	Unit Size	From	To
NONE		320	326
Acid Volumes		Fracture Treatments	
N/A		NONE	

Formation	Top
HUNTON	310

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	1145098

075-22029-02

API NO. 0752202902
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

Form 1002A

Rev. 2009

☒ ORIGINAL
☐ AMENDED (Reason) _____

COMPLETION REPORT

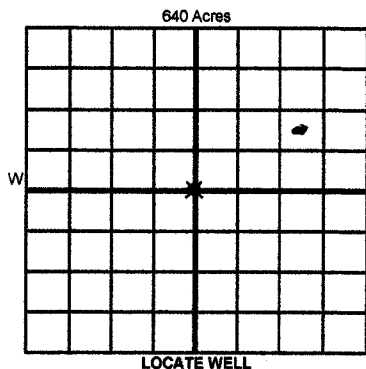
TYPE OF DRILLING OPERATION

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

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

COUNTY KIOWA SEC 31 TWP 6N R 16W
LEASE NAME BURTON WELL NO. 103
SE 1/4 NW 1/4 SE 1/4 NE 1/4 FSL OF 1/4 SEC 760 FV OF 1/4 SEC 1758
ELEVATION
Derrick FL Ground 0 Latitude (if known) Longitude (if known)
OPERATOR NAME LAWTON BROTHERS Inc OTC / OCC OPERATOR No. 24345
ADDRESS 1861 BROWN BLVD Suite 217-631
CITY ARLINGTON STATE TX ZIP 76006

SPUD DATE 3/4/17
DRLG FINISH DATE 3/5/17
DATE OF WELL COMPLETION 8/4/17
1st PROD DATE 8/5/17
RECOMP DATE _____



COMPLETION TYPE

☒ SINGLE ZONE
☐ MULTIPLE ZONE
Application Date _____
☐ COMINGLED
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	<u>8 7/8</u>	<u>930</u>	<u>355</u>	<u>100</u>		<u>60</u>	<u>SUR.</u>
INTERMEDIATE							
PRODUCTION	<u>4 1/2</u>			<u>456</u>		<u>80</u>	<u>SUR</u>
LINER							
TOTAL DEPTH						<u>456</u>	

PACKER @ _____ BRAND & TYPE _____

PACKER @ _____ BRAND & TYPE _____

PLUG @ _____

PLUG @ _____

TYPE _____

TYPE _____

PLUG @ _____

PLUG @ _____

TYPE _____

TYPE _____

TOTAL DEPTH

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	<u>HUNTON</u>					<u>No Flow</u>
SPACING & SPACING ORDER NUMBER	<u>none</u>					
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	<u>OIL</u>					
PERFORATED INTERVALS	<u>320-326</u>					
ACID/VOLUME	<u>N/A</u>					
FRACTURE TREATMENT (Fluids/Prop Amounts)	<u>NONE</u>					

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	<u>8/5/2017</u>					
OIL-BBL/DAY	<u>2</u>					
OIL-GRAVITY (API)	<u>32</u>					
GAS-MCF/DAY	<u>0</u>					
GAS-OIL RATIO CU FT/BBL	<u>N/A</u>					
WATER-BBL/DAY	<u>0</u>					
PUMPING OR FLOWING	<u>PUMPING</u>					
INITIAL SHUT-IN PRESSURE	<u>20</u>					
CHOKE SIZE	<u>N/A</u>					
FLOW TUBING PRESSURE	<u>6</u>					

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 EVERETT SPARKS NAME (PRINT OR TYPE) EVERETT SPARKS DATE 4/10/20 PHONE NUMBER 817 312 1473
ADDRESS 1861 BROWN BLVD 631 CITY ARLINGTON TX STATE TX ZIP 76006 EMAIL ADDRESS evspark@sbccglobal.net

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.

LEASE NAME _____

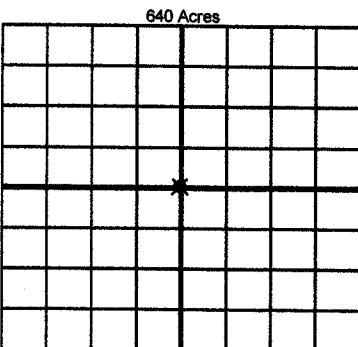
WELL NO. _____

NAMES OF FORMATIONS	TOP
HUNTON	500 310

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

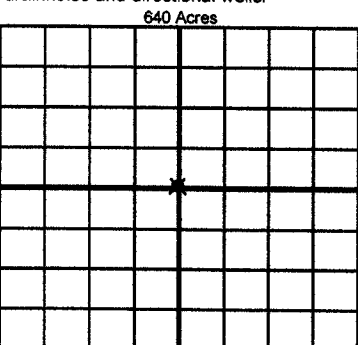
Other remarks:



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	Feet From 1/4 Sec Lines FSL FWL
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	Total Length
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	Total Length
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	Total Length
BHL From Lease, Unit, or Property Line:			