

OKLAHOMA CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
INTENT TO REENTRY

SPECIAL ORDERS
** **
** **
** **
** **
** **
** **

APPROVED 02/06/86

API-NUMBER: 049-60039

OTC/OCC NUMBER: 04513-0

TYPE: REENTRY

OPERATOR NAME: HUNTON OIL & GAS CORPORATION

SECTION: 04 TOWNSHIP: 02N RANGE: 03W COUNTY: GARVIN
LOCATION: CNW4 SW4

FEET FROM: SOUTH 1/4 SECTION LINE: 1980 FEET FROM: WEST 1/4 SECTION LINE: 0660
FEET FROM NEAREST LEASE LINE:

BOTTOM HOLE LOCATION

SECTION: TOWNSHIP: RANGE: COUNTY:
LOCATION:

FEET FROM: 1/4 SECTION LINE: FEET FROM: 1/4 SECTION LINE:
FEET FROM NEAREST LEASE LINE:

LEASE NAME: ROSE VOSE 4 WELL NO: 2-S OPER TO BEGIN: 02/02/86

FORMATION CODES, NAMES, DEPTHS ** PERMIT VALID FOR LISTED FORMATIONS ONLY **
401SPRG SPRINGER 09120

TOTAL DEPTH: 09270 PLUG BACK DEPTH: 00000
GROUND ELEVATION: 1136 SURFACE CASING DEPTH: 0485

ORDERS
SPACING NUMBERS: 031231
LOCATION EXCEPTION NUMBER: 000000 INCREASED DENSITY NUMBER: 000000
CEMENT AND LOG: NO STAGE COLLAR DEPTH: 00000 BLM: NO
H2S: NO CONTINGENCY PLAN FILED: NO
FRESH WATER SUPPLY WELL DRILLED: NO SURFACE WATER USED TO DRILL: NO

SURFACE OWNER ADDRESS	OPERATOR RETURN ADDRESS
ROBERT K. BALL	HUNTON OIL & GAS
10204 MAJOR AVE.	6416 N. SANTA FE
OKLAHOMA CITY OK 731200000	OKLAHOMA CITY OK 731160000

AN APPROVED INTENT TO DRILL DOES NOT CONSIDER THE VALIDITY OF ANY LEASE.
APPROVAL IS BASED ONLY ON THE ITEMS APPEARING ON THE CARD, WHICH ARE WITHIN
THE JURISDICTION OF THE COMMISSION. THE APPROVAL OF THIS INTENT TO DRILL DOES
NOT WAIVE THE RIGHT OF ANY OPERATOR AND OR DRILLING CONTRACTOR IN OBSERVANCE
OF ALL SPECIAL AND GENERAL ORDERS OF THE OIL AND GAS CONSERVATION DIVISION.
THIS PERMIT VOID IF DRILLING NOT STARTED WITHIN 6 MONTHS.

NOTIFICATION OF WELL SPUD
OKLAHOMA CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
JIM THORPE OFFICE BUILDING
OKLAHOMA CITY, OKLAHOMA 73105-4993
(RULE NO. 3-204.9)

OTC/OCC OPERATOR NUMBER: 04513-0

API NUMBER: 049-60039

DATE: 02/06/86

DATE OF WELL SPUD: 02/07/86

NAME OF OPERATOR: HUNTON OIL & GAS CORPORATION
ADDRESS: 6416 NORTH SANTA FE
OKLAHOMA CITY OK 731160000

PHONE: (405) 848-5545

WELL LOCATION

LEASE NAME: ROSE VOSE 4

WELL NUMBER: 2-S

LOCATION: 04-02N-03W
CNW4 SW4
GARVIN

INSTRUCTIONS (PLEASE FOLLOW)

PLEASE TYPE OR USE BLACK INK

- 1) THIS REPORT MUST BE COMPLETED IN DUPLICATE AND MAILED WITHIN FOURTEEN (14) DAYS, AFTER SPUDGING, TO THE CORPORATION COMMISSION AT THE ABOVE ADDRESS.
- 2) STATE THE EXACT DATE THE WELL WAS SPUDDED.

SURFACE CASING CEMENT BY(IF JOB COMPLETED)

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP CODE: _____

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.

NAME

TITLE

SEC

04513

Form No. 1000
(Rev. 1985)

PLEASE TYPE OR PRINT IN BLACK INK ONLY

Batch I.D. (OCC Use Only)

12045006

2. API Number

Re 04960039

FILE ORIGINAL ONLY

4. NOTICE OF INTENTION TO:

Drill ☐ Deepen ☐ Plug ☐ Back ☐ Amend ☐ Other ☐ Re-Entry

5. WELL LOCATION:

NOTE: If well is to be directionally drilled, put bottom hole location on reverse side and check box. ☐Section Township Range County
4 2N 3W Garvin

Well Location Feet from Quarter Section

C 1/4 NW 1/4 SW 1/4 South Line 1980' West Line 660'

If unspaced - well will be _____ feet from the nearest least line.

6. Lease Name Rose Vose 4 Well No. 2-S

7. Name of Operator

Hunton Oil & Gas Corp.

Address

Phone (A.C./Number)

6416 N. Santa Fe

(405) 848-5545

City

State

Zip

Oklahoma City

Okla.

73116

8. WELL LOCATION SURFACE OWNER: (Must be completed.)

Name (If more than one, attach sheet)

Robert K. Ball

Address

City

State

Zip

10204 Major Avenue

Oklahoma City

Oklahoma

73120

9. Target Formations and Depths (Limit to Ten)

Springer 9120'

4015P
EG10. Total Depth ☐ Plug Back Depth ☐

9270'

11. Ground Elev.

1136

12. Date Oper. to Begin

2/2/86

13. Surf. Casing Depth ☒

485'

Stage Collar Depth ☐

SPACING INFORMATION:

13-A. Do you intend to circulate cement from total depth to surface? (See instructions) Yes ☐ No ☒ XX

14. Spacing Order Numbers and Size of Spacings

40 Acre

31231

15. Application Pending C.D. No.

NA

16. Location Exception Order No.

NA

17. Increased Density Order No.

NA

18. Is well being drilled under Federal jurisdiction?

Yes ☐ No ☒ XXX19. Is H₂S anticipated?Yes ☐ No ☒ XX

20. Will a fresh water supply well be drilled at this location?

Yes ☐ No ☒ XXWill surface water be used in drilling this well? Yes ☐ No ☒ XX

PROPOSED CASING DESIGN: (To include surface casing. If space below is insufficient attach separate sheet.)

21. Casing Size (Inches)	22. Section Length (Feet)	23. Casing Weight (lbs/ft)	24. Casing Grade	25. Setting Depth (Feet)	26. Est. Top of Cement (Feet)	27. Design WHP PSI	28. Design Mud Wght. (ppg)	29. S.O.P. (Class)
10 3/4	485	32.75	H-40	485	Surface	NA	NA	NA
5 1/2	9270	17	NA	9356	5000'	NA	NA	NA

I hereby certify that I am authorized to submit this application, which was prepared by me or under my supervision and direction. The facts and proposals made herein are true to the best of my knowledge and belief.

Signature

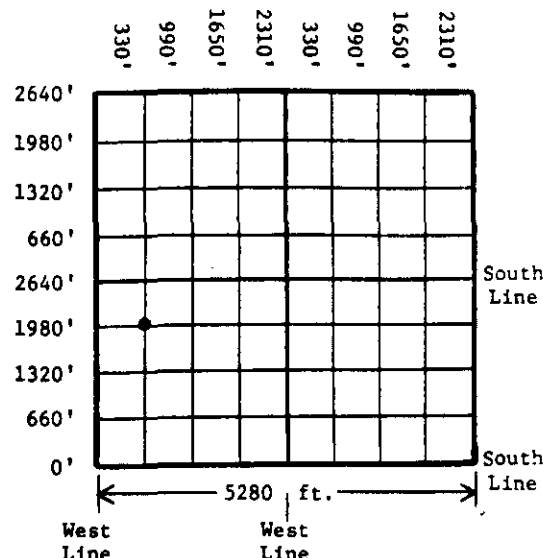
Title

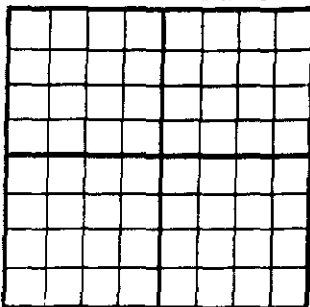
Date

Address Permit is to be sent to (If different than No. 7 above)

Phone (A.C./Number)

NOTICE: This application is void if drilling is not started within six (6) months of approval date. An approved copy must be posted on location while drilling and completing well.

3. Locate Well and Outline
Lease or Spacing UnitSECTION 4
TOWNSHIP 2N
RANGE 3W
QUARTER SECTION
WELL NAME Rose Vose 4-2-S
WELL NUMBER



BOTTOM HOLE LOCATION ON A DIRECTIONALLY DRILLED WELL

Section	Township	Range	County
Well Location		Feet from Quarter Section	
$\frac{1}{4}$	$\frac{1}{4}$	$\frac{1}{4}$	$\frac{1}{4}$ South Line West Line

COMPLETION INSTRUCTIONS:

1. List the OTC/OCC Operator Number assigned to you.
2. To be assigned by OCC. You must use this number on all future correspondence about this well and on all future forms completed when it is requested by the Commission.
3. Mark the plat located in the upper right hand corner for the form with the well location.
4. Check the proper box, indicating whether this application is to deepen a well, drill a new well, plug back an existing well, if the application is an amendment or, for some other reason, such as re-entering.
5. Legal description of the location intended to be drilled, including the number of feet the well is located from the South Line and the West Line of the quarter section. If on unspaced property, give the number of feet well will be from nearest lease line.
6. Give the Lease Name (or Farm Name) and the well number that you are going to assign to the well.
7. Legal company name of operator. If individual, give full name. Also give the address of the operator.
8. List the name and address of the surface owner where the well is to be drilled.
9. Give the names of formations and depths of each formation from which you are proposing to produce. Limit to ten. Use Nomenclature referred to in Rule 1-507.
10. If the application is for drilling a new well, give the estimated total depth, that you plan to drill, in this space. NOTE: If this application is to plug back an existing well, give the plug back depth in this space.
11. Give the elevation of the ground level at the drilling site. (Number of feet above sea level.)
12. Give the proposed date that drilling operations are to commence.
13. List the total depth, in feet, of the surface casing. If you plan to use a stage collar, list the setting depth.
- 13-A. If you opt to cement the production casing from total depth to surface, answer "yes" to this question and submit a cement bond log with the form 1002A upon completion of this well as required in Rule 3-206.
14. If the property, where well is to be drilled has been spaced, list the spacing order numbers and the size spacing for each formation.
15. If spacing has been applied for but not approved, list the application C.D. Number assigned by the Commission.
16. If a Location Exception has been granted, list the order number.
17. If an Increased Density has been granted, list the order number.
18. Indicate whether the land where well is to be drilled is under jurisdiction of the Bureau of Land Management or is restricted Indian land.
19. If offset or other operators in the local area, where you intend to drill, encountered concentrations of H_2S in excess of 100 parts per million or, if for any other reason, you anticipate such encounter you must answer "yes" to this question.
20. Answer "yes" if you have drilled a fresh water well. If water is to be used from a creek, stream or a surface owner's pond, answer "yes".
21. Casing size in inches shown in one to four digit decimal as applicable. Ex: 7 must be shown as 7.0. You must show 10-3/4 as 10.750. Do not list fractions.
22. List length of each casing string section (or segment) according to weight and grade run. The sections are to be listed in the order in which they are run in the hole.
23. List casing weight in pounds per foot shown in decimals. Ex: 53.50
24. List alphabetic/numerical grade of casing as given by manufacturer. Ex: p110
25. List depth in which the bottom of each casing string section (or segment) is set.
26. List the depth to the approximate planned top of cement.
27. Anticipated wellhead pressure used in the design of each casing string.
28. Planned weight of mud in pounds per gallon to be used while drilling through each casing string. Ex: 10.2
29. Pressure rating of blowout preventer planned to be used based on API classification Ex: 3 (3 = API class 3M, which indicated working pressure rating of 3000 psi).
30. Give the well location, name and number on the right vertical margin for the surface location.

FOR COMMISSION USE ONLY. DO NOT WRITE BELOW THIS LINE

APPROVED SELECTED

INTENT TO DRILL CHECKLIST

1. Surety
 - A. None filed
 - B. Expired BMD/LC/YS
 - C. Outstanding Consent Order
2. Permitting C.D. No. (SPACING/LOC. EXCEPTION)
Hearing date
3. Surface casing, used feet
 - A. Another Restricted Area
 - B. Less (50')/More (90') than 1,500 feet
 - C. Option for 3.B.
 - D. Reentry, Surf. casing (existing) feet
4. Not spaced Less (165')/More (330') than 2,500 feet
Only feet from N/S and feet from E/W Lease Line
5. Spacing Order No.
 - A. Square pattern, 24, 16, 40, 160, 640
 - B. Slot pattern
Acres - (5/20/80/320)
Post-1971 (Y, W) S.U./L.D.
 - C. Rectangular Pattern
5/20/80/320
W/SL or W/L/W
 - D. Too many wells, acres
 - E. Deviated Hole (Surface off pattern)
6. Location Exception
 - A. Bottom hole off pattern
 - B. Surface Location off pattern
7. Operator name different on order? Previous name Location Exception/Increased Density/Pooling
8. Special Orders apply. Yes ☐ No ☐

31231/4078 L Spr

API NO. 049-60039
OTC PROD. UNIT NO. 049-088990

Rule 165:10-3-25

ORIGINAL

AMENDED

Reason Amended RE-WORK WAS NEVER PERFORMED

COMPLETION REPORT
OKLAHOMA CORPORATION COMMISSION

Oil & Gas Conservation Division

Post Office Box 52000

Oklahoma City, Oklahoma 73152-2000

909022006

Form 1002A

Rev. 2005

PLEASE TYPE OR USE BLACK INK ONLY

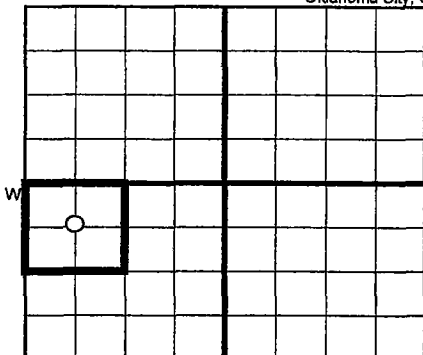
NOTE: Attach copy of original 1002A if recompletion or reentry

TYPE OF DRILLING OPERATION

X STRAIGHT HOLE DIRECTIONAL HOLE HORIZONTAL HOLE

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

COUNTY	GARVIN	SEC	4	TWP	2N	RGE	3W
LEASE NAME	ROSE VOSE 4		WELL NO.		#2-S		
SHL	CNW 1/4 SW 1/4 1/4 1/4		1980 FSL		660 FWL OF 1/4 SEC		
ELEVATION	Derrick Fl		Ground		1136'		
DRLG FINISHED	8/2/55		WELL COMPLETION		8/17/55		
1ST PROD DATE			RECOMP DATE		none		



LOCATE WELL

OPERATOR NAME	HUNT ON OIL & GAS CORP.	OTC/OCC OPERATOR NO.	04513
ADDRESS	P.O. BOX 18191		
CITY	OKLAHOMA CITY	STATE	OK
		ZIP	73154

COMPLETION TYPE

X	SINGLE ZONE
	MULTIPLE ZONE ORDER NO.
	COMMINGLED ORDER NO.
	LOCATION EXCEPTION ORDER NO.
	INCREASED DENSITY ORDER NO.
	PENALTY

OIL OR GAS ZONES

FORMATIONS	TOP	BOTTOM
SPRINGER	9120'	9150'

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	FILLUP	TOP
Conductor								
Surface	10.75"	32.75#		485'		450	485'	SURF.
Intermediate								
Production	5.50"			9356'		400	Est. 1856'	Est. 7500'
Liner								

PACKER @ 9063' BRAND & TYPE KV8 TOTAL DEPTH 9356'

PLUG @ TYPE

FORMATION	SPRINGER
SPACING & SPACING ORDER NUMBER	40 AC. 31231
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp	or DRY
PERFORATED INTERVALS	9130'-9150'
ACID/VOLUME	N/A
Fracture Treated?	No
Fluids Amounts	

INITIAL TEST DATA

INITIAL TEST DATE	NA
OIL-BBL/DAY	
OIL-GRAVITY (API)	
GAS-MCF/DAY	
GAS-OIL RATIO CU FT/BBL	
WATER-BBL/DAY	
PUMPING OR FLOWING	
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	KEVIN CROWLEY, VICE PRESIDENT
P.O. Box 18191	NAME (PRINT OR TYPE)
ADDRESS	Oklahoma City OK 73154
	CITY STATE ZIP
12/31/09	405-848-5545
DATE	PHONE NUMBER

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

ROSE VOSE 4

WELL NO. 2S

NAMES OF FORMATIONS	TOP	BOTTOM
HOGSHOOTER	70'	
1st DEESE	71-13'	
2nd DEESE	7770'	
GIBSON	8140'	
HART	8388'	
SPRINGER	9024'	

APPROVED	DISAPPROVED	FOR COMMISSION USE ONLY
	<i>Le</i>	1) ITD Section
		a) No Intent to Drill on file
		1) Send warning letter
		2) Recommend for contempt
<i>tt</i>		2) Reject Codes
9-3-09		

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

Other remarks:

640 Acres

If more than two 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
Measured Total Depth	True Vertical Depth	Feet From Quarter Section Lines FSL FWL	
BHL From Lease, Unit, or Property Line:			

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (DRAINHOLES)

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn	Direction	Total Length
Measured Total Depth	True Vertical Depth	End Pt Location From Lease, Unit or Property Line:	

DRAINHOLE #2

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn	Direction	Total Length
Measured Total Depth	True Vertical Depth	End Pt Location From Lease, Unit or Property Line:	

Instructions

- A. Please type or print using black ink.
 B. Form must be signed by former operator and new operator.
 C. Outline boundaries of lease and spot well being transferred.
 D. Attach 1002A for well.
 E. Questions should be directed to Well Records (405) 521-2275.

OKLAHOMA CORPORATION COMMISSION

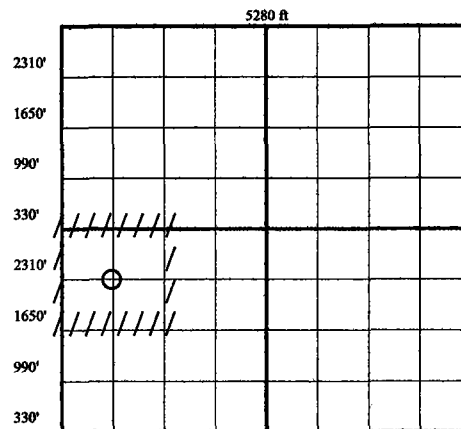
Oil & Gas Conservation Division
 Post Office Box 52000
 Oklahoma City, OK 73152-2000

Transfer of Operator
 OAC 165:10-1-15

908021635

Form 1073
 Rev. 2001

API No. 049-60039		OTC Prod. Unit No. 049-088990	
Location NW 1/4 SW 1/4 1/4 1/4		Sec. 4	Twp. 2N Rge. 3W
Ft FSL of Qtr Sec 1980'		Ft FWL of Qtr Sec 660'	County Garvin
Current Well Name/No. Rose Vose 4 #2S			
Original Well Name/No. Rose Vose 4 #2S			
Unit Name (if applicable)			



Well Class: ☒ Oil ☐ Gas ☐ Dry ☐ Plugged

Producing formation(s) Springer	
Oil Transporter/Purchaser	OTC No.
Gas Measurer	OTC No.

The effective date of transfer of this well for the purposes of Commission records, is the date the transfer is approved by the Commission.

CURRENT OPERATOR

Name Hunton Oil & Gas Corp.		OCC No. 4513
Address P.O. Box 18191		
City Oklahoma City	State OK	Zip 73154
Phone No. (405) 848-5545	FAX No. (405) 848-5563	
I verify that I am the legal operator of record with authority to transfer operatorship of this well.		
Signature		
Name & Title (Typed or Printed) Kevin Crowley - Vice President		
Signed and sworn to before me this 31st day of December , 2008		
My commission expires to EXP. 08/13/10		

NEW OPERATOR

Name Hunton Operating LLC		OCC No. 22484
Address P.O. Box 18191		
City Oklahoma City	State OK	Zip 73154
Phone No. (405) 848-5545	FAX No.	
Being the new operator, as of the effective date and time of transfer accept the facts presented as being true and correct and accept the operational responsibility for the well on the described property.		
Signature		
Name & Title (Typed or Printed) Kevin Crowley, Manager		
Signed and sworn to before me this 31st day of December , 2008		
My commission expires to EXP. 08/13/10		

I verify under oath that I have exercised due diligence in attempting to locate the current operator of record according to OCC records and have attached a copy of the certified recorded assignment of lease.

Signature

Signed and sworn to before me this _____ day of _____

My commission expires: _____

Notary Public

FOR OCC USE ONLY

Surety Dept. ☒ Approved ☐ Rejected Date **AUG 27 2009**

Well Records Dept. ☒ Approved ☐ Rejected Date **AUG 28 2009**

WELL RECORDS
APPROVED

NOTE: By processing this Form 1073, the Oklahoma Corporation Commission has approved the contents thereof as to form only. Oklahoma Corporation Commission does not warrant that the facts provided by the operator are true. Form is not approved until approved by Well Records.

9091806000
A

Instructions

- A. Please type or print using black ink.
- B. Form must be signed by former operator and new operator.
- C. Outline boundaries of lease and spot well being transferred.
- D. Attach 1002A for well.
- E. Questions should be directed to Well Records (405) 521-2275.

OKLAHOMA CORPORATION COMMISSION

Oil & Gas Conservation Division

Post Office Box 52000

Oklahoma City, OK 73152-2000

Transfer of Operator

OAC 165:10-1-15

Form 1073
Rev. 2001

API No. 049-60039		OTC Prod. Unit No. 049-088990	
Location NW 1/4 SW 1/4 1/4 1/4		Sec. 4	Twp. 2N Rge. 3W
Ft FSL of Qtr Sec 1980'		Ft FWL of Qtr Sec 660'	County Garvin
Current Well Name/No. Rose Vose 4 #2S			
Original Well Name/No. Rose Vose 4 #2S			
Unit Name (if applicable)			

2310'									
1650'									
990'									
330'									
2310'									
1650'									
990'									
330'									

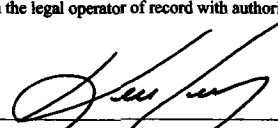
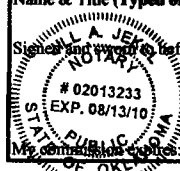
Locate Well On Grid Above

Well Class: ☒ Oil ☐ Gas ☐ Dry ☐ Plugged

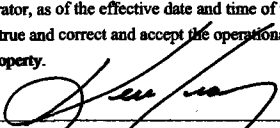
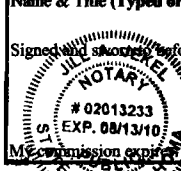
Producing formation(s) Springer	
Oil Transporter/Purchaser	OTC No.
Gas Measurer	OTC No.

The effective date of transfer of this well for the purposes of Commission records, is the date the transfer is approved by the Commission.

CURRENT OPERATOR

Name Hunton Oil & Gas Corp.		OCC No. 4513	
Address P.O. Box 18191			
City Oklahoma City	State OK	Zip 73154	
Phone No. (405) 848-5545	FAX No. (405) 848-5563		
I verify that I am the legal operator of record with authority to transfer operatorship of this well.			
Signature 			
Kevin Crowley - Vice President			
Name & Title (Typed or Printed)			
Signed and sworn to before me this 31st day of December , 2008			
 Notary Public			

NEW OPERATOR

Name Hunton Operating LLC		OCC No. 22484	
Address P.O. Box 18191			
City Oklahoma City	State OK	Zip 73154	
Phone No. (405) 848-5545	FAX No.		
Being the new operator, as of the effective date and time of transfer accept the facts presented as being true and correct and accept the operational responsibility for the well on the described property.			
Signature 			
Kevin Crowley, Manager			
Name & Title (Typed or Printed)			
Signed and sworn to before me this 31st day of December , 2008			
 Notary Public			

I verify under oath that I have exercised due diligence in attempting to locate the current operator of record according to OAC records, who has abandoned the above well/lease and cannot be located to obtain signature. I have attached a copy of the certified recorded assignment of lease.

Signed and sworn to before me this _____ day of _____		Signature _____	
My commission expires: _____		Notary Public	
FOR OCC USE ONLY		SEP 22 2009	
Surety Dept. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected	Date SEP 21 2009	Well Records Dept. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected	WELL RECORDS

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API NO. 049-60039
OTC PROD. UNIT NO. 049-088990

Rule 165:10-3-25
ORIGINAL
X AMENDED
Reason Amended

COMPLETION REPORT
OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000

908212003

Form 1002A
Rev. 2005

PLEASE TYPE OR USE BLACK INK ONLY

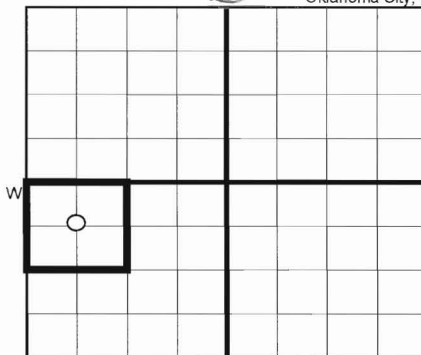
NOTE: Attach copy of original 1002A if recompletion or reentry

TYPE OF DRILLING OPERATION

X STRAIGHT HOLE DIRECTIONAL HOLE HORIZONTAL HOLE

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

COUNTY GARVIN SEC 4 TWP 2N RGE 3W
LEASE NAME ROSE VOSE 4 WELL NO #2-S
SHL NW 1/4 SW 1/4 1/4 1/4 1980 FSL 660 FWL OF 1/4 SEC
ELEVATION SPUD DATE
Derrick FI Ground 1136' 6/30/55
DRLG FINISHED 8/2/55 WELL COMPLETION 8/17/55
1ST PROD DATE 8-17-55? RECOMP DATE none



LOCATE WELL

OPERATOR NAME HUNTON OIL & GAS CORP. OTC/OCC OPERATOR NO 04513
ADDRESS P.O. BOX 18191
CITY OKLAHOMA CITY STATE OK ZIP 73154

COMPLETION TYPE
X SINGLE ZONE
MULTIPLE ZONE ORDER NO.
COMMINGLED ORDER NO.
LOCATION EXCEPTION ORDER NO.
INCREASED DENSITY ORDER NO.
PENALTY

OIL OR GAS ZONES
FORMATIONS TOP BOTTOM
SPRINGER 9120' 9150'

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	FILLUP	TOP
Conductor								
Surface	10 75"	32 75#		485'		450	485'	SURF
Intermediate								
Production	5.50"			9356'		400	Est. 1856'	Est. 7500'
Liner								

PACKER @ 9063' BRAND & TYPE KV8 TOTAL DEPTH 9356'

PLUG @ TYPE

COMPLETION & TEST DATA BY PRODUCING FORMATION
FORMATION SPRINGER
SPACING & SPACING 40 AC.
ORDER NUMBER 31231
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp Oil
PERFORATED INTERVALS 9130'-9150'
ACID/VOLUME N/A
Fracture Treated? No
Fluids Amounts

INITIAL TEST DATA

INITIAL TEST DATE 8-17-55
OIL-BBL/DAY 79
OIL-GRAVITY (API) 37°
GAS-MCF/DAY 36
GAS-OIL RATIO CU FT/BBL
WATER-BBL/DAY
PUMPING OR FLOWING Flowing
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 KEVIN CROWLEY, VICE PRESIDENT
NAME (PRINT OR TYPE)
P.O. Box 18191 Oklahoma City OK 73154
ADDRESS CITY STATE ZIP
12/31/09 405-848-5545
DATE PHONE NUMBER

SCANNED

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 ROSE VOSE 4 WELL NO. 2S

	FOR COMMISSION USE ONLY
APPROVED _____	DENIED _____
 	1) ITD Section a) No Intent to Drill on file 1) Send warning letter _____ 2) Recommend for contempt _____
	2) Reject Codes _____ _____ _____ _____ _____

Other remarks:

If more than two 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.

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

SEC	TWP	RGE	COUNTY
Spot Location		Feet From Quarter Section Lines	
1/4	1/4	1/4	1/4
Depth of Deviation	Radius of Turn	Direction	Total Length
Measured Total Depth	True Vertical Depth	End Pt Location From Lease, Unit or Property Line:	

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