TYPE OR USE BLACK INK See Reverse for Instructions

OKLAHOMA CORPORATION COMMISSION Oil and Gas Conservation Division Jim Thorpe Office Building Oklahoma City, Oklahoma 73105-4993

(Rev 1993)

PLUGGING RECORD OAC 165.10-11-7 API No. 063-23216 Lease Name/No.: 1/45W 1/4NW 1/45W 1/4 Total Depth: 3493 Location // Ö County: Sec: Rge · Plugging Date: 3-19-94 FSL FWL Ft. from 1/4 sec. Well Class. Treatable Water Depth: Locate Well on Grid Operator OCC/OTC No.. 17408-0 Name XPIORATION -TAC Phone. 4/15-Address

state: 1/K/a City

Pipe Record

				_
Size	Run (ft)	Pulled	(ft)]
			Conductor	ŀ
848	320	-0-	Surface	ŀ
			I. C.	٦,
			I. C.]
11/2	3/00	2320	P. C.	1
			Lnr	1

Set 1 - From 27/6 To 2722 Set 2 - From 2738 To 2742

Perforation Depths

MAY 18 1994

Type of Plug Size Hole or Pipe of Placement Calculated Meanwred NTop of Oil & Cas Conserved on This is a ged Plug Depth No. Sacks Slurry Cement Volume 36 1 2 15 3 80 420 2.20 33 10 5

Remarks las Reason for Plugging.

I declare under applicable Corporation Commission Rule, that I am authorized to make this certification, that the placing of cement plugs in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented are true, correct, and complete to the best of my knowledge. This covers cementing data.

Signature James Backer	Name & Titl	e Typed lommy	Cooper
CO. Name Cooper Difficht Stapicus IN P.	ermit No./36	Date 7-17-94	Phone/15-332-5750
Address P.D. Box 1179	City Ada	State OK/g	Z1p 74820

	I declare under applicable Corporation Commission Rule, that I am authorized to make	
1	certification, that I have knowledge of the well data and information presented her	ein,
1	and that data and facts presented are true, correct, and complete to the best of my	•
ł	knowledge. This covers all well data and information presented herein.	

Signature

Quelowame & Title Typed President

Date 5-13-94

- Form must be completed in its entirety and mailed to the appropriate District Office within 30 days after plugging is completed
- 2 Send original and one (1) copy
- 3 Type or use BLACK ink only
- 4 API No must be on form. To get an API No call Petroleum Information at (405) 848 9824
- 5 In specifying the type of plug use the following notations CIBP cast iron bridge plug CEM cement plug CIBP + CEM cast iron bridge pug and cement. Packer packer if other abreviations are used please define.
- 6 Cement plugs shall be placed in the well bore as required by the Rules of the Commission plus any additional plugs as may be specified by the District Manager or his representative where unusual local conditions exist. (OAC 165 10 11 6)
- 7 The minimum amount of cement normally used in each plug in the open hole shall be a slurry volume equal to the amount necessary to fill the calculated volume of 100 feet of the hole in which the plug is placed
- 8 A 30 feet cement plug is required to be placed near the top of the well (OAC 165 10 11 6)

DISTRICT I 115 W 6th St Box 779 Bristow OK 74010 (918) 367 3396 DISTRICT II 101 S 6th, Box 1107 Kingfisher OK 73750 (405) 375 5570 DISTRICT III 1016 Maple, Box 1525 Duncan OK 73533 (405) 255 0103 DISTRICT IV 703 N Broadway Ada OK 74820 (405) 332 3441

001516

pproved	Rejected			Approved	Rejected		
		1	API No invalid			10	Record of pipe pulled incomplete
		2	Legal Description invalid for County			11	Well location does not match plat
		3	Operator No missing/invalid			12	Treatable water depth missing
		4	Well location missing/invalid			13	Perforation depths missing
		5	Lease name missing	<u></u>		14	Information on plug - operator
<u></u>		6	Well No missing			15	Plugging description missing
		7	Plugging date invalid			16	Plugging contractors name missing
		8	Well type missing/invalid			17.	Information on plug - cementing company
		9	Total depth missing/invalid			12	Other

API NO 063-23216 DIC/OCC OPERATOR NO. 17408 OKLAHOMA CORPORATION COMMISSION Oil & Gas Conservation Division Jim Thorpe Office Building Oklahoma City, Oklahoma 73105-4993 OAC 165 10-3-4(h)

003294

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with DAC 165-10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

	TYPE OR	USE BLACK INK C	NLY			
Field Name W. Dustin				O C C. Distr	ict 44	
Operator DEKA EXP			***	*County L	UGHES	
Lease Name RANKEL		!		*Well Number	1-7	
Location: 1/4 SW 1/4 NW 1	14 5W 1/4	Sec 7	7	нр <i>91</i> /	Rge. /	25
	Colored Explored Red in the	estatur (18 g. servijos (18 d. n. 1878)	Terkerin a William 1947 Har May		Protest con Department	e je nakonikali
CEMENT CASING DATA	CONDUCTOR CASING	SURFACE CASING	ALTERNATIVE CASING	INTERMEDIATE CASING	PRODUCTION STRING	LINER
Cementing Date	' ; ;				10:22-93	
Size of Drill Bit (inches)	v ¹¹			14, 1	77/8"	,
Estimated % wash or hole enlargement used in calculations	1 1		The second secon			
Size of Casing (inches O D)					41/2"	115
'Top of Liner (if liner used) (ft)	· _			1 1		-
Setting Depth of Casing (ft) from ground level		1, }(*),}(;)	, , \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1	3100	
Type of Cement (API Class) In first (lead) or only Slurry		1 1 1	'		Previon	
In second Slurry		j	1			
In third Slurry						
Sacks of Cement Used In first (lead) or only Slurry					190	
In second Slurry			I			
In third Slurry						
Vol of Slurry pumped (Cu ft) (14 X15) In first (lead) or only Slurry					209	
In second Slurry						
In third Slurry		-				
Calculated Annular Height of Cement behind Pipe (ft)	1		1 * 1 1 51		600	
Cement left in pipe (ft)	,		′		42	
Amount of Surface Casing Required (from	form 1000)	305111		ft.		
Was cement circulated to Ground Surface?				ot (DV Tool) Us	ed? [] Yes	∏ № ft.

⁽CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM)
* Designates items to be completed by Operator - Items NOT so designated shall be completed by the Cementing Company

HAD GOOD CIRC Threwow Job.	Remarks
HAD OTOS	
threwout to b.	5 8
The state of the s	35 4
3 6 7	000
	O AFF O O O O O O O O O O O O O O O O O
CEMENTING COMPANY	OPERATOR P
am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts	I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are
complete to the best of my knowledge. This certification covers	true, correct and complete to the best of my knowledge. This certification covers all well data and information presented
pementing data only	herein
WL Kitsmiller	James L. Monday
Signature of Cementer or Authorized Representative	*Signature of Operator or Authorized Representative
Willes Millen Comention	James L. Nondorf, President
Name of Person and Title (Type or Print) Addisorfor	Name of Person and Title (Type or Print) DEKA Exploration, Inc.
Cementing Company RT1 BOX 12	P.O. Box 14057
Street Address or P O Box	*Street Address or P O Box
Briston OK HOND	Oklahoma City, OK 73113
City State Zip	*City State Zip
.918 367 3363	405-749-0004
Telephone (AC) Number	*Telephone (AC) Number
10-22-93	2/25/94
Date	*Date

 $\mathbf{I}^{-1} = \mathbf{I}$

- A) This form shall be filed by the operator, at the O C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole ,
 - (Form 1002A) for a producing well or a dry hole

 B) An original and one copy of this form shall be filed as an attachment to the Completion Report, (Form 1002A) for each cementing company used on a well

 (To be filed)
 - C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form (to be filed
- Cementing Company and Operator shall comply with the applicable portions of OAC 165 10-3-4(h)
- Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165 10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW THE CORPORATION COMMISSION REGULATIONS.
- TYPE OR USE BLACK INK ONLY.

- "•		4									_			
OH 19A		1 Rule 165:									.AHOM	COR	POR	ON REPORT ATION COMMISSION
063-23	216	ORIGINAL AMENDED	N N									lia I	hor	ERVATION DIVISION pr. Building
OTC PROD UN	IT NO	Reason Am	ended:		_					Dk'a	rema (City,	Ck	lahosa 73105-499
PLEASE TYPE O	r use blac	K INK DN.	Y				 - -	4		-		_		FORMATION
TYPE OF DRILL O STROIGHT HO If directiona	LL N DIR	ECTIONAL	HOLE []	HORIZONIAL for boito	HOLE n hole lo	ocation		+			-	-		SPACING & SPACING ORDER NUMBER
EDI VEDI	ighes		7	7 TWP		12E		1					Ε	CLASSIFICATION
LEASE NAME: I				HELL NO	1-7			1					E.	Dil, Gas, Dry,
SHL: SWI/4 I	1W1/4 SW	71/4 16	50 FSL	330'	FWL OF 1	1/4 SEC	0							PERFORATED
BHL. 1/4	1/4	1/4	FSL		FHL OF 1	I/4 SEC								INTERVALS
ELEVATION De	rrick Fl 9	17 ' Gro	und 91	T i Stand D	¶5/13	3/93								ACID/VOLUME
TREE FINISHED	10-22	-93 ₩E	LL COMPLE	TION					LOCATE N	→ / ¯		1		Fracture Treated
ST PROD DATE		_	RECO	P DATE						W	IDN	ńS)		Fluids Amounts
OPERATOR NAME	DEKA	Explo	ratio	on, In	c.	010/000	OPER NO	¹	7408	No.		INIT	ŢΩŧ	TEST DATA
ACDRESS		Box 1												Test Date
LITY	Oklah	oma (ity	STAT	€ OK	7	IP 73]	11	3	_				/day
COMPLETION TY	PE			OIL OR GAS	ZONES					_				vity (API)
O SINGLE ZON				FORMATIONS	i		TO	P	BOTTOM			┝		/day
1) MULTIPLE 20	NE ORDER I	v 0.					1		<u> </u>			├──		Ratio Eu Ft/bbl
COMMINGLED	DRDER NO										•			bl/day
LOCATION EXCE	PTION ORDS	CN R								_		<u> </u>		or Flowing
INCREDSED DEN	icity nnnci	D MO										 -		Shut-In Pressur
INCREHSED DEF	OTT GREE					· · · · · · · · · · · · · · · · · · ·						CHOP		
PENALTY										ل		 		IBING PRESSURE
CASING & CEM	NI (Fore	1 06 2C must	be atta	ched)					<u>.</u>	_				
TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	FILLU	p	TCP			A re	?C0?	d of the formati
Conductor							ļ <u> </u>	_		_				ire that I have k ration to make th
Surface	8 5/8	11		320		255	Sur	£	Surf	_		HILL	1h	ne data and facts
Intermediate								\bot		╛		Ιl	/4	me of
Production	1 1/2'	10.	}	3100		190	305	0	2382'		/	7€		
Liner										4	6	ועסח דעסח		D. Box 14
Packer #		Bi and I	Туре			10	TAL DEPT	н	3493'					25/9 4

Type

AND	GAS	CONS	RITUN CUMMISSION ERVATION DIVISION			HEV. 1392
ancea	Jia Cit _i	Thor , Ck	pe Building lahosa 73105-4993	COMPLETION & TEST	DATA BY PRODUCING FORMA	TION GLER 3
-			FORMATION	L Gilcrease		U. Gilcrease
-			SPACING & SPACING ORDER NUMBER	43310 317596		3310 31756
		E	CLASSIFICATION Oil, Gas, Dry, Inj	Dry		Dry
+				2986'-96'		2716'-22'
			PERFORATED INTERVALS			2738'-42'
21-9	7	\	ACID/VOLUME	2000 Gal 7 l/	2% FE-HCL	000 gal 7 l/
VDN	٠.		Fracture Treated	3 gal Lo-9	urf 300	PE-HCL: 1 gal
	11C	#	Fluids Amounts]	o Surf 300
0	ÎN	ITIAL.	TEST DATA			
	In	itial	Test Date			
	01	1-661	/day			
	01	l-Gra	vity (GPPI)			
	Gar	s-MCF	/day			
	Ga	s-011	Ratio Eu Ft/bbl		0	
	Wa	ter-b	bl/day		0,	
	Pu	sping	or Flowing		32	
	ln	itial	Shut-In Pressure		9	
	CH	OKE S	IZE			
	FL	ON TU	BING PRESSURE			•

FLON 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 as authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the dath and facts stated herein to be true, correct and complete to the best of my knowledge and belief James L. Nondorf NAME IDRINT OR TYPET 73113 Oklahoma City, P.O. Box 14057 717 CITY STATE **NUDRESS** 405-749-0001 2/25/94 PHONE NUMBER DATE

End Pr Location From Lease, Lr..

or Propert, Line

PLEASE TYPE OR USE BLACK INK ONLY
FORMATION RECOPD
we formation names and three flavariable, or descriptions of thickness of formations of liked through. Show intervals ared on deallstee tested

ared or Cr.lister tested		
NAMES OF FORMATIONS	TOP	EDTTOM
Earlsboro . Inola L. Booch Hartshorne Gilcrease U. Gilcrease L. Gilcrease Wapanuka Union Valley/Crom.	1308' 1594' 2232' 2399' 2612' 2714' 2964' 3161' 3279'	
No.	*	
TD	3493'	

CENSE IMINE			WELL NO
	F	OR	COMMISSION USE DNLY
APPROVED	DISAPPROVED	1)	ITD Section a) No intert to Dr or file
Sh		2)	(1) Serd warring letter (2) Recommend for contempt (3) Recommend for contempt (4) Recommend for contem
WSo		3)	Financial Statement/Letter of Credit/Bond Reject Codes

was an electrical survey	רטי 🔏	Yes	D No	
Date last log was run		10-2	21-93	
was CD2 encountered? D Y	es 🖔 No	a* +	nat depths?	
was HIS encountered? D Y	es KNS	at v	enat depths"	
ke e unusual drilling di 'f ves - d lef y explair	rcuestan	ces er	countered?	ŗ Yes XN.
	~_		7	
			L.	
	* 7	. 7	<u> </u>	
		- 0		

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	,		2 P
440.0	20770- US F 1 000710N FRR 21207710NO 19915	Ç	ž. 9

640 Acres

gore than two drainholes proposed, attach a arate sheet indicating necessary inforsation

ection must be stated in -ees azzauth

ase note, the horizontal nhole and its end point be located within the ideries of the lease or injury to the Einectional reys' are required for oranholes and prainholes ptional wells

BUILUM	MULE	LUCHITUN	FUK	DIKE	LITUNAL	HULE.
SEC		TWD		·	RGE	

Measured Total Depth

SEC		TWD		RGE	COUNTY		
Spot	Location 1/4	1/4	1/4	1/4	Feet From Quarter Se FSL		FWL of 1/4 SECTION
Measu	ired Total	Depth		True	vertical Depth	BHL From Line	Lease, Unit, or Property

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE (DRAINHOLES)

DRAINHOLE #1	SEC		THE	RGE	COUNTY		
Spot Location 1/4	1/4	1/4	1/4	Feet From Quar	-te- Section FS-	Lines	FWL of 1/4 SECTION
Depth of Deviat	t10n		Radius of	Flurr	Direction		Total Length
Measured Total	Depth		True	Vertical Depth		End Pt	Location From Lease, Unit
DRAINHOLE #2	SEC		тыр	RGE	COUNTY	<u>-</u>	
Spot Location 1/4	1/4	1/4	1/4	Feet From Quar	ter Section	Lines	FWL of 1/4 SECTION
Depth of Deviat	107		Radius of	Turn	Direction		Tota' Length

True Vertica. Depth

API NO 063-23216
DIC/OCC OPERATOR NO
17408

Cement left in pipe (ft)

*OKLAHOMA CORPORATION COMMISSION Oil & Gas Conservation Division Jim Thorpe Office Building Oklahoma City, Oklahoma 73105-4993 OAC 165 10-3-4(h)

1003294

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165-10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

field Name W. Dustin				O C C. Distri	ct 4.			
Operator. DEKA EXPLORATION			<u></u>	county Hi	GHE5			
Lease Name BANKE!				*Well Number				
Location 1/4 SW 1/4 NW 1	¹⁴ 5W ^{1/4}	Sec 7	1	THP 9N	Rge.	Rge. 12E		
to les directs l'Assette de la bettern terretor	Broke with the	and the second	42 - 650CT M - 1	process special contract				
EMENT CASING DATA	CONDUCTOR CASING	SURFACE CASING	ALTERNATIVE CASING	INTERMEDIATE CASING	PRODUCTION STRING	LINER		
Cementing Date	1 1	10-14-93						
Size of Drill Bit (inches)		1244	1,,	*		4, 1		
Estimated % wash or hole enlargement used in calculations	,	1005	#	1	,			
Size of Casing (inches O D)	I I	85/8	1,1	. 1	ļ ,	1 110		
Top of Liner (if liner used) (ft.)	1		14 ti			1 111		
Setting Depth of Casing (ft) from ground level		320		, IF		1		
Type of Cement (API Class) In first (lead) or only Slurry		PREM.						
In second Slurry								
In third Sturry					 -			
Sacks of Cement Used In first (lead) or only Slurry		255	-	i. 4		,		
In second Slurry								
In third Slurry								
Vol of Slurry pumped (Cu ft) (14 X15.) In first (lead) or only Slurry		300.9						
In second Sturry								
In third Sturry	· · · · · · · · · · · · · · · · · · ·		······································	\				
Calculated Annular Height of Cement behind Pine (ft)			-	\	· 			

	Amo	Int of	Surface C	asıng	Require	d (from f	orm 1000)	30	25	1				ft			
Ī	'Was	cement	circulat	ed to	Ground	Surface?	K Yes	D No		Was	Cement	Stagin	g Tool	(DV Tool) Us	ed?	ฏ Yes	KNO
ŀ	Was	Cement	Bond Log	run?	D Yes	Άζνο	(If so,	ATTACH C	COPY)	1 f	Yes, at	what d	epth _				ft

⁽CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM.)
* Designates items to be completed by Operator - Items NOT so designated shall be completed by the Cementing Company.

Remarks III	*Remarks
1.4	y ord from from the first
1 · · · · · · · · · · · · · · · · · · ·	10 4 10 4 10 4 10 4 10 4 10 4 10 4 10 4
	7
1 1	
C.R. 18 BBI. CINT. TO SURFACE	
CEMENTING COMPANY	- OPERATOR
declare under applicable Corporation Commission rule, that I	I declare under applicable Corporation Commission rule, that I
am authorized to make this certification, that the cementing of	am authorized to make this certification,that I have knowledge
casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts	of the well data and information presented in this report, and that data 'and' facts presented on both sides of this form are
presented on both sides of this form are true, correct and	true, correct and complete to the best of my knowledge. This
complete to the best of my knowledge. This certification covers tementing data only	certification covers all well data and information presented herein
,,,	
Stan montey	Janes X. Monday
Signature of Cementer or Authorized Representative	*Signature of Operator or Authorized Representative
STAN M'INTURF CEMENTER	James L. Nondorf, President
Name of Person and Title (Type or Print)	Name of Person and Title (Type or Print)
HAILBURTON ENERGY SERV.	DEKA Exploration, Inc.
Cementing Company	Operator
Rt. 1 Box 12	P.O. Box 14057
Street Address on P O Box	*Street Address or P.O. Box
	1
BRISTOW OK. 74010	Oklahoma City OK 73113
City State Zip	*City State Zip
-3.7/2.7	
918 367 2 60 9	405-749-0004
Telephone (AC) Number	*Telephone (AC) Number
	'
10.14-93	2/25/94
Date	*Date

- A) This form shall be filed by the operator, at the U L.C. UI.C. (Form 1002A) for a producing well or a dry hole.

 B) An original and one copy of this form shall be filed as an attachment to the (Completion Report, (Form 1002A) for each cementing company used on a well

 A) This form shall be filed by the operator, at the U L.C. UI.C.

 C) Completion Report, (Form 1002A) for each cementing company used on a well

 C) Completion Report, (Form 1002A) for each cementing company used on one form (to be filed
 - in duplicate).
- Cementing Company and Operator shall comply with the applicable portions of CAC 165 10-3-4(h)
- 3. Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165 10-3-4(h)
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW THE CORPORATION COMMISSION REGULATIONS
- 5. TYPE OR USE BLACK INK ONLY.

OTC/OCC NUMBER: 17408-0 API NUMBER: 063-23216 APPROVAL DATE: 10/07/93 NOTICE OF INTENTION TO: DRILL

STRAIGHT HOLE SEC: 7
SPOT LOCATION: CSW4 NW4 SW4 TYPE OF DRILLING OPERATION: STRAIGHT HOLE TWP: 09N RGE: 12E

COUNTY: HUGHES

FEET FROM: SOUTH 1/4 SECTION LINE 1650 FEET FROM: WEST 1/4 SECTION LINE 330

FEET FROM THE NEAREST LEASE LINE 330

WELL NO: 1-7 LEASE NAME RANKEL

OPERATOR NAME: DEKA EXPLORATION, INC.

SURFACE OWNER ADDRESS OPERATOR RETURN ADDRESS GLEN RANKEL DEKA EXPLORATION, INC.

P.O.BOX 6205 P.O.BOX 14057

WOODLAND HILLS CA 91365 OKLAHOMA CITY OK 73113

OPERATION TO BEGIN: 10/15/93

FRESH WATER SUPPLY WELL DRILLED: NO SURFACE WATER USED TO DRILL: YES FORMATION CODES, NAMES, DEPTHS, (PERMIT VALID FOR LISTED FORMATIONS ONLY)

オエエヘい	CODEO, MA		/	* * ***	1010 1101		~
	404ERLB	EARLSBORO				1310	
	404BOCH	BOOCH				2218	
	404HRSR	HARTSHORNE				2395	
	403GLCR	GILCREASE				2600	
	402WPCK	WAPANUCKA				3117	
	402UNVL	UNION VALLEY				3235	
	402CMWLU	CROMWELL UP				3240	
	202TPCK	TULIP CREEK				3376	
	202VIOL	VIOLA	/1	M, GRO	JP/	4205	
	402CMWI	CROMWELL	, -	,	-,	3310	

SPACING ORDER NUMBERS: 43310 317596

TOTAL DEPTH: 3600

DEPTH TO BASE OF TREATABLE WATER-BEARING FM: 255 GROUND ELEVATION:

SURFACE CASING: 305

PIT INFORMATION:

TYPE OF PIT SYSTEM: ON-SITE

TYPE OF MUD SYSTEM: WATER BASED

EXPECTED CHLORIDE CONTENT OF PIT: MAXIMUM 2500 PPM; AVERAGE 2300 PPM

PIT IS LOCATED IN A HYDROLOGICALLY SENSITIVE AREA

CATEGORY OF PIT(S): 2

LINER NOT REOUIRED FOR CATEGORY: 2 PIT(S)

APPROVED METHOD FOR DISPOSAL OF DRILLING FLUIDS:

EVAPORATION/DEWATER AND BACKFILLING OF RESERVE PIT

THIS PERMIT DOES NOT ADDRESS THE RIGHT OF ENTRY OR SETTLEMENT OF SURFACE DAMAGES. THE DURATION OF THIS PERMIT IS SIX MONTHS, EXCEPT AS OTHERWISE PROVIDED BY RULE OCC-OGR 3-204.

RULE 165: 10-3-4 (E) - THE OPERATOR SHALL GIVE 24 HOURS NOTICE BY TELEPHONE TO THE APPROPRIATE DISTRICT OFFICE OF THE CONSERVATION DIVISION AS TO WHEN SURFACE CASING WILL BE RUN.

K

	SEC TWP RGE	COUNTY
	Spot location	Feet from quarter section lines
	1/4 1/4 1/4 Measured True	1/4 South line West line Bottom hole location from
1	Total Depth Vertical D	epth lease, unit or property line:
	30. BOTTOM BOLZ LOCATION FOR BOR	IZONTAL HOLE (DRAIN HOLES)
	Drain hole #1 SEC TMP MGE	
	Spot location of end point	Feet from quarter section lines
	1/4 1/4 1/4 Depth of Radius o	1/4 South line West line of Direction Total
If more than two drainholes are proposed, attach separate sheet		of Direction Total Length
indicating the necessary information.	Measured True	and point location from
Direction must be stated in	Total Depth Vertical D	Depth lease, unit or property line:
degree azimuth.	SPC TWO RCP	COUNTY
Please note, the horizontal drainhole and its end point must	spot location of end point	Feet from quarter section lines
be located within the legal	Depth of Radius o	1/4 South line West line of Direction Total
boundaries of the lease or specing unit. Directional surveys are required for all drainholes and	Deviation Turn Measured True	Length End point location from
required for all drainholes and directional wells	Total Depth Vertical I	<u> </u>
		ard, P.O. Box 53585, Oklahoma City, OK 73152). If no
,	ddress of owner/operator Location	on (nearest 1/4 1/4 1/4) Deepest producing interval
Name of owner/operator A 4. A cement bond log is rewater-bearing formations	equired to be run and submitted from to the ground surface. MITENT TO DRILL CHECKLIST (For OCC Use Only)	m not less than 100 ft below the base of the treatable
Name of owner/operator A 4. A cement bond log is rewater-bearing formations	equired to be run and submitted from to the ground surface. MITENT TO DRILL CHECKLIST (For OCC Use Only) Toward Rejected 1. Surety	m not less than 100 ft below the base of the treatable 43310/40m CMULSO Upr, md/, Lur, WLCX S
Name of owner/operator A 4. A cement bond log is rewater-bearing formations	equired to be run and submitted from to the ground surface. MYENT TO DRILL CHECKLIST (For OCC Use Only)	m not less than 100 ft below the base of the treatable 43310/ 4000 CMULSD Upr, Md, Lwr, WLCX S
Name of owner/operator A 4. A cement bond log is rewater-bearing formations	equired to be run and submitted from to the ground surface. MYENT TO DRILL CHECKLIST (For OCC Use Only)	m not less than 100 ft below the base of the treatable 43310/ 40cc CMULSO UP, Md, LW, WLCX S 317596/ 40 UNUL SNOR, 7RMN, ERU
Name of owner/operator A 4. A cement bond log is rewater-bearing formations	equired to be run and submitted from to the ground surface. MYENT TO DRILL CHECKLIST (For OCC Use Only)	m not less than 100 ft below the base of the treatable 43310/ 4000 CMULSD Upr, Md/, Lwr, WLCX S
Name of owner/operator A 4. A cement bond log is rewater-bearing formations	equired to be run and submitted from to the ground surface. MYENT TO DRILL CHECKLIST (For OCC Use Only)	m not less than 100 ft below the base of the treatable 43310/ 40cc CMULSO UP, Md, LW, WLCX S 317596/ 40 UNUL SNOR, 7RMN, ERU
4. A cement bond log is rewater-bearing formations Appropriate Toler (rich as	equired to be run and submitted from to the ground surface. MYENT TO DRILL CHECKLIST (For OCC Use Only)	m not less than 100 ft below the base of the treatable 43310/ 40cc CMULSO UP, Md, LW, WLCX S 317596/ 40 UNUL SNOR, 7RMN, ERU
4. A cement bond log is rewater-bearing formations Apple of the control of the c	equired to be run and submitted from to the ground surface. INTENT TO DRILL CHECKLIST (For OCC Use Only) A. None filed B. Expired date C. Outstanding Content 2. Intents 3. Specing 4. Surface Casing 4. Surface Casing	m not less than 100 ft below the base of the treatable 43310/40cc CMULSD UP, Md/, LWI, WLCX S 317596/40 UNUL SNOR TRMNERU WAPK, VIOL
A. A cement bond log is rewater-bearing formations Applicant Tolip (reck of Applicant Tolip (re	equired to be run and submitted from to the ground surface. NATENT TO DRILL CHECKLIST (For OCC Use Only) Poved Rejected 1. Surety A. None flied B. Expired date C. Outstanding Contest 2. Intents 3. Specing 4. Geology A. Surface Casing 1. Insufficient ap 1. Insufficient ap 1. Insufficient ap 1. Insufficient ap	m not less than 100 ft below the base of the treatable 43310/ 40cc CMULSDUPM, Md, LWM, WLCX S 317596/ 40 WULL SNOR, TRMN GRU WAPK, VIOL WAPK, VIOL
4. A cement bond log is rewater-bearing formations Applications Applic	equired to be run and submitted from to the ground surface. MYENT TO DRILL CHECKLIST (For OCC Use Only) To A. None filed B. Expired date C. Outstanding Contest Insurficient and submitted from the contest of the ground surface. 3. Specing 1. Insurficient and submitted from the contest of	m not less than 100 ft below the base of the treatable 43310/4/000 CMULSDUP, Md, LW, WLCX S 317596/40 LUAPK, VIOL WAPK, VIOL termstive Casing Program ubmitted for Alternative Casing Program current ft, endy current ft, soly ft, ft.
4. A cement bond log is rewater-bearing formations Applications Applic	address of owner/operator Location Equired to be run and submitted from to the ground surface. INTENT TO DRILL CHECKLIST (For OCC Use Only) To A. Hone filed B. Expired date C. Outstanding Contest 2. Intents 3. Specing 1. Insufficient and 2. Insufficient and 3. Ne Affidevit St. 8. Reentry, region file. B. Unspecial less the only file. C. Special Specing file.	m not less than 100 ft below the base of the treatable 433/0/2/ORC CMULSDUM, Md, Lwr, WLCX S 3/7596 / 40 MAPK, WIDL WAPK, VIDL MAPK, VIDL MAPK, VIDL MAPK, VIDL Martines for Alternative Casing Program on 2500 ft. (1859)/more than 2500 ft. (1309) order No
4. A cement bond log is rewater-bearing formations Applications Applic	address of owner/operator Location Equired to be run and submitted from to the ground surface. INTENT TO DRILL CHECKLIST (For OCC Use Only) Peved Rejected 1. Surety A. Hone filed B. Expired date C. Outstanding Contest 2. Intents 1. Insufficient and 2. Insufficient and 2. Insufficient and 2. Insufficient and 3. Recentry, required the series of th	m not less than 100 ft below the base of the treatable 433/0/2/000 CMULSDUM, Md, Lwr, WLCX S 3/7596/40 MAPK, WIDL WAPK, WIDL WAPK, WIDL WAPK, WIDL Strengthed for Alternative Casing Program Current on 250 ft. (157)/more than 2500 ft (330) Order NS and Dream NS and Dream NS and Dream NS. 20. 80. 820 NO
4. A cement bond log is rewater-bearing formations Applications Applic	Required to be run and submitted from to the ground surface. INTENT TO DRILL CHECKLIST (For OCC Use Only) Peved Rejected 1. Surety A. Mone filed B. Expired date C. Outstanding Contest 2. Intents 1. Insufficient and 1. Square pettern and 2. Rectangular set only 2. Rectangular set on Net 2.	m not less than 100 ft below the base of the treatable 43310/240cc CMULSD UP, Md/, Lur, WLCX S T3/7596/40 MAPK, WIOL WAPK, WIOL WAPK, WIOL WAPK, WIOL WAPK, WIOL Tree ft, enty from E/W line Order No. 1, 23, 10, 50, 10, 820 SW OF pattern; 5, 20, 50, 320 SO pattern; 5, 20, 50, 320 OF pattern; 5, 20, 50, 320
4. A cement bond log is rewater-bearing formations Applications Applic	address of owner/operator Location Equired to be run and submitted from to the ground surface. INTENT TO DRILL CHECKLIST (For OCC Use Only) Peved Rejected 1. Surety A. None filed B. Expired date C. Outstanding Content 2. Intents 3. Specing 1. Insufficient am 2. Insufficient am 2. Insufficient am 2. Insufficient am 3. No Affidevit St. B. Reentry, requit B. Unspecial less the only R. C. Special Specing C. I. Square pettern 2. Rectangular pe 1. No Affidevit St. B. Rectangular pe 1. Surface hole to	m not less than 100 ft below the base of the treatable 433/0/4000 CMULSDUP, Md/LWI, WLCX S 3/7596/40 mpt Order LUMP, WIDL MAPK, WIDL MARK, WIDL
4. A cement bond log is rewater-bearing formations Applicate: 09/23/1993 The Case: 000000000 Applications Appli	address of owner/operator Location Equired to be run and submitted from to the ground surface. INTENT TO DRILL CHECKLIST (For OCC Use Only) Poved I. Surety A. Hone filed B. Expired date C. Outstanding Contest 2. Intents Insufficient am 2 Insufficient am 2 Insufficient And 3 No Affidevit SA 8. Reentry, required B. Unapsed less to serve any C. Special	m not less than 100 ft below the base of the treatable 433/0/4000 CMULSDUM, Md, Lur, WLCXS 3/7596/40 mpt Order LUNUL SNOR, 7RMN ERU LUMPK, VIDL MAPK, VIDL MARK, VIDL
4. A cement bond log is rewater-bearing formations Applicate: 09/23/1993 The Case: 000000000 Applications Appli	address of owner/operator Location Equired to be run and submitted from to the ground surface. INTENT TO DRILL CHECKLIST (For OCC Use Only) Wood Rejected 1. Surety A. None filed B. Expired date C. Outstanding Contest 2. Intents 2. Intents 3. Specing 4. Surface Casing 1. Insufficient and 2. Insufficient Air 3. No Affidavit S. 8. Reentry, requil B. Unspecial less the entry C. Special Specing R. C. Special Spec	m not less than 100 ft below the base of the treatable 43310/4000 CMULSDUM, Md, LW, WLCXS 3/7596/40 mpt Order LUUL, SNOR, TRMN, CRU LUUL, SNOR, TRMN, LUUL
4. A cement bond log is rewater-bearing formations Applications Applic	address of owner/operator Location Inquired to be run and submitted from to the ground surface. INTENT TO DRILL CHECKLIST (For OCC Use Only) Invest Rejected 1. Surety A. None filed B. Expired date C. Outstanding Contest 2. Intents 3. Specing 4. Surface Casing 1. Insufficient application of the contest of the conte	m not less than 100 ft below the base of the treatable 433/0/2000 CMULSDUGN, Md/, Lwr, WLCX S Toloroder WAPK, WIDL WAPK,

TYPE OR USE BLACK INK See Reverse for Instructions

OKLAHOMA CORPORATION COMMISSION Oil and Gas Conservation Division Jim Thorpe Office Building Oklahoma City, Oklahoma 73105-4993

(Rev 1993)

PLUGGING RECORD OAC 165.10-11-7 API No. 063-23216 Lease Name/No.: 1/45W 1/4NW 1/45W 1/4 Total Depth: 3493 Location // Ö County: Sec: Rge · Plugging Date: 3-19-94 FSL FWL Ft. from 1/4 sec. Well Class. Treatable Water Depth: Locate Well on Grid Operator OCC/OTC No.. 17408-0 Name XPIORATION -TAC Phone. 4/15-Address

state: 1/K/a City

Pipe Record

				_
Size	Run (ft)	Pulled	(ft)]
			Conductor	ŀ
848	320	-0-	Surface	ŀ
			I. C.	۱,
			I. C.]
11/2	3/00	2320	P. C.	1
			Lnr	1

Set 1 - From 27/6 To 2722 Set 2 - From 2738 To 2742

Perforation Depths

MAY 18 1994

Type of Plug Size Hole or Pipe of Placement Calculated Meanwred NTop of Oil & Cas Conserved on This is a ged Plug Depth No. Sacks Slurry Cement Volume 36 1 2 15 3 80 420 2.20 33 10 5

Remarks las Reason for Plugging.

I declare under applicable Corporation Commission Rule, that I am authorized to make this certification, that the placing of cement plugs in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented are true, correct, and complete to the best of my knowledge. This covers cementing data.

Signature James Backer	Name & Titl	e Typed lommy	Cooper
CO. Name Cooper Difficht Stapicus IN P.	ermit No./36	Date 7-17-94	Phone/15-332-5750
Address P.D. Box 1179	City Ada	State OK/g	Z1p 74820

	I declare under applicable Corporation Commission Rule, that I am authorized to make	
1	certification, that I have knowledge of the well data and information presented her	ein,
1	and that data and facts presented are true, correct, and complete to the best of my	•
ł	knowledge. This covers all well data and information presented herein.	

Signature

Quelowame & Title Typed President

Date 5-13-94

- Form must be completed in its entirety and mailed to the appropriate District Office within 30 days after plugging is completed
- 2 Send original and one (1) copy
- 3 Type or use BLACK ink only.
- 4 API No must be on form. To get an API No call Petroleum Information at (405) 848 9824
- 5 In specifying the type of plug use the following notations CIBP cast iron bridge plug CEM cement plug CIBP + CEM cast iron bridge pug and cement. Packer packer if other abreviations are used please define.
- 6 Cement plugs shall be placed in the well bore as required by the Rules of the Commission plus any additional plugs as may be specified by the District Manager or his representative where unusual local conditions exist. (OAC 165 10 11 6)
- 7 The minimum amount of cement normally used in each plug in the open hole shall be a slurry volume equal to the amount necessary to fill the calculated volume of 100 feet of the hole in which the plug is placed
- 8 A 30 feet cement plug is required to be placed near the top of the well (OAC 165 10 11 6)

DISTRICT I 115 W 6th St Box 779 Bristow OK 74010 (918) 367 3396 DISTRICT II 101 S 6th, Box 1107 Kingfisher OK 73750 (405) 375 5570 DISTRICT III 1016 Maple, Box 1525 Duncan OK 73533 (405) 255 0103 DISTRICT IV 703 N Broadway Ada OK 74820 (405) 332 3441

001516

Approved	Rejected			Approved	Rejected		
		1	API No invalid			10	Record of pipe pulled incomplete
		2	Legal Description invalid for County			11	Well location does not match plat
		3	Operator No missing/invalid			12	Treatable water depth missing
		4	Well location missing/invalid			13	Perforation depths missing
		5	Lease name missing	<u>"</u>		14	Information on plug - operator
		6	Well No missing			15	Plugging description missing
		7	Plugging date invalid			16	Plugging contractors name missing
		8	Well type missing/invalid			17.	Information on plug - cementing company
		9	Total depth missing/invalid			10	Other

API NO 063-23216
DIC/OCC OPERATOR NO
17408

Cement left in pipe (ft)

*OKLAHOMA CORPORATION COMMISSION Oil & Gas Conservation Division Jim Thorpe Office Building Oklahoma City, Oklahoma 73105-4993 OAC 165 10-3-4(h)

1003294

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165-10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

field Name W. Dustin				O C C. Distri	ct 4.			
Operator. DEKA EXPLORATION			<u></u>	county Hi	GHE5			
Lease Name BANKE!				*Well Number				
/· — · — — — — — — — — — — — — — — — —	Location 1/4 SW 1/4 NW 1/4 SW 1/4 Sec 7							
to les directs l'Assette de la bettern terretor	Broke with the	and the second	42 - 650CT M - 1	process special contract				
EMENT CASING DATA	CONDUCTOR CASING	SURFACE CASING	ALTERNATIVE CASING	INTERMEDIATE CASING	PRODUCTION STRING	LINER		
Cementing Date	1 1	10-14-93						
Size of Drill Bit (inches)		1244	1,,	*		4, 1		
Estimated % wash or hole enlargement used in calculations	,	1005	#	1	,			
Size of Casing (inches O D)	I I	85/8	1,1,1,1	. 1	ļ ,	1 110		
Top of Liner (if liner used) (ft.)	1		14 ti			1 111		
Setting Depth of Casing (ft) from ground level		320		, IF		1		
Type of Cement (API Class) In first (lead) or only Slurry		PREM.						
In second Slurry								
In third Sturry					 -			
Sacks of Cement Used In first (lead) or only Slurry		255	-	i. 4		,		
In second Slurry								
In third Slurry								
Vol of Slurry pumped (Cu ft) (14 X15.) In first (lead) or only Slurry		300.9						
In second Sturry								
In third Sturry	· · · · · · · · · · · · · · · · · · ·		······································	\				
Calculated Annular Height of Cement behind Pine (ft)			-	\	· 			

	Amo	Int of	Surface C	asıng	Require	d (from f	orm 1000)	30	25	1				ft			
Ī	'Was	cement	circulat	ed to	Ground	Surface?	K Yes	D No		Was	Cement	Stagin	g Tool	(DV Tool) Us	ed?	ฏ Yes	KNO
ŀ	Was	Cement	Bond Log	run?	D Yes	Άζνο	(If so,	ATTACH C	COPY)	1 f	Yes, at	what d	epth _				ft

⁽CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM.)
* Designates items to be completed by Operator - Items NOT so designated shall be completed by the Cementing Company.

Remarks III	*Remarks
1.4	y ord from from the first
1 · · · · · · · · · · · · · · · · · · ·	10 4 10 4 10 4 10 4 10 4 10 4 10 4 10 4
	7
1 1	
C.R. 18 BBI. CINT. TO SURFACE	
CEMENTING COMPANY	- OPERATOR
declare under applicable Corporation Commission rule, that I	I declare under applicable Corporation Commission rule, that I
am authorized to make this certification, that the cementing of	am authorized to make this certification,that I have knowledge
casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts	of the well data and information presented in this report, and that data 'and' facts presented on both sides of this form are
presented on both sides of this form are true, correct and	true, correct and complete to the best of my knowledge. This
complete to the best of my knowledge. This certification covers tementing data only	certification covers all well data and information presented herein
,,,	
Stan montey	Janes X. Monday
Signature of Cementer or Authorized Representative	*Signature of Operator or Authorized Representative
STAN M'INTURF CEMENTER	James L. Nondorf, President
Name of Person and Title (Type or Print)	Name of Person and Title (Type or Print)
HAILBURTON ENERGY SERV.	DEKA Exploration, Inc.
Cementing Company	Operator
Rt. 1 Box 12	P.O. Box 14057
Street Address on P O Box	*Street Address or P.O. Box
	1
BRISTOW OK. 74010	Oklahoma City OK 73113
City State Zip	*City State Zip
-3.7/2.7	
918 367 2 60 9	405-749-0004
Telephone (AC) Number	*Telephone (AC) Number
	'
10.14-93	2/25/94
Date	*Date

- A) This form shall be filed by the operator, at the U L.C. UI.C. (Form 1002A) for a producing well or a dry hole.

 B) An original and one copy of this form shall be filed as an attachment to the (Completion Report, (Form 1002A) for each cementing company used on a well

 A) This form shall be filed by the operator, at the U L.C. UI.C.

 C) Completion Report, (Form 1002A) for each cementing company used on a well

 C) Completion Report, (Form 1002A) for each cementing company used on one form (to be filed
 - in duplicate).
- Cementing Company and Operator shall comply with the applicable portions of CAC 165 10-3-4(h)
- 3. Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165 10-3-4(h)
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW THE CORPORATION COMMISSION REGULATIONS
- 5. TYPE OR USE BLACK INK ONLY.

API NO 063-23216 DIC/OCC OPERATOR NO. 17408 OKLAHOMA CORPORATION COMMISSION Oil & Gas Conservation Division Jim Thorpe Office Building Oklahoma City, Oklahoma 73105-4993 OAC 165 10-3-4(h)

003294

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with DAC 165-10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

	TYPE OR	USE BLACK INK C	NLY			
Field Name W. Dustin				O C C. Distr	ict 44	
Operator DEKA EXP			***	*County L	UGHES	
Lease Name RANKEL		!		*Well Number	1-7	
Location: 1/4 SW 1/4 NW 1	14 5W 1/4	Sec 7	7	нр <i>91</i> /	Rge. /	25
	Colored Explored Red in the	estatur (18 g. servijos (18 d. n. 1878)	Terkerin a William 1947 Har May		Protest con Department	e je nakonikali
CEMENT CASING DATA	CONDUCTOR CASING	SURFACE CASING	ALTERNATIVE CASING	INTERMEDIATE CASING	PRODUCTION STRING	LINER
Cementing Date	' ; ;				10:22-93	
Size of Drill Bit (inches)	v ¹¹			14, 1	77/8"	,
Estimated % wash or hole enlargement used in calculations	1 1		The second secon			
Size of Casing (inches O D)					41/2"	115
'Top of Liner (if liner used) (ft)	· _			1 1		-
Setting Depth of Casing (ft) from ground level		1, }(*),}(;)	, , \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1	3100	
Type of Cement (API Class) In first (lead) or only Slurry		1 1 1	'		Previon	
In second Slurry		j	1			
In third Slurry						
Sacks of Cement Used In first (lead) or only Slurry					190	
In second Slurry			I			
In third Slurry						
Vol of Slurry pumped (Cu ft) (14 X15) In first (lead) or only Slurry					209	
In second Slurry						
In third Slurry		-				
Calculated Annular Height of Cement behind Pipe (ft)	1		1 * 1 1 51		600	
Cement left in pipe (ft)	,		′		42	
Amount of Surface Casing Required (from	form 1000)	305111		ft.		
Was cement circulated to Ground Surface?				ot (DV Tool) Us	ed? [] Yes	∏ № ft.

⁽CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM)
* Designates items to be completed by Operator - Items NOT so designated shall be completed by the Cementing Company

HAD GOOD CIRC Threwow Job.	Remarks
HAD OTOS	
threwout to b.	5 8
The state of the s	35 4
3 6 7	000
	O AFF O O O O O O O O O O O O O O O O O
CEMENTING COMPANY	OPERATOR P
am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts	I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are
complete to the best of my knowledge. This certification covers	true, correct and complete to the best of my knowledge. This certification covers all well data and information presented
pementing data only	herein
WL Kitsmiller	James L. Monday
Signature of Cementer or Authorized Representative	*Signature of Operator or Authorized Representative
Willes Millen Comention	James L. Nondorf, President
Name of Person and Title (Type or Print) Addisorfor	Name of Person and Title (Type or Print) DEKA Exploration, Inc.
Cementing Company RT1 BOX 12	P.O. Box 14057
Street Address or P O Box	*Street Address or P O Box
Briston OK HOND	Oklahoma City, OK 73113
City State Zip	*City State Zip
.918 367 3363	405-749-0004
Telephone (AC) Number	*Telephone (AC) Number
10-22-93	2/25/94
Date	*Date

 $\mathbf{I}^{-1} = \mathbf{I}$

- A) This form shall be filed by the operator, at the O C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole ,
 - (Form 1002A) for a producing well or a dry hole

 B) An original and one copy of this form shall be filed as an attachment to the Completion Report, (Form 1002A) for each cementing company used on a well

 (To be filed)
 - C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form (to be filed
- Cementing Company and Operator shall comply with the applicable portions of OAC 165 10-3-4(h)
- Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165 10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW THE CORPORATION COMMISSION REGULATIONS.
- TYPE OR USE BLACK INK ONLY.

- "•		4									_			
OH 19A		1 Rule 165:									.AHOM	COR	POR	ON REPORT ATION COMMISSION
063-23	216	ORIGINAL AMENDED	N N									lia I	hor	ERVATION DIVISION pr Building
OTC PROD UN	IT NO	Reason Am	ended:		_					Dk'a	rema (City,	Ck	lahosa 73105-499
PLEASE TYPE O	r use blac	K INK DN.	Y				 - -	4		-		_		FORMATION
TYPE OF DRILL O STROIGHT HO If directiona	LL N DIR	ECTIONAL	HOLE []	HORIZONIAL for boito	HOLE n hole lo	ocation		+			-	-		SPACING & SPACING ORDER NUMBER
EDI VEDI	ighes		7	7 TWP		12E		1					Ε	CLASSIFICATION
LEASE NAME: I				HELL NO	1-7			1					E.	Dil, Gas, Dry,
SHL: SWI/4 I	1W1/4 SW	71/4 16	50 FSL	330'	FWL OF 1	1/4 SEC	0							PERFORATED
BHL. 1/4	1/4	1/4	FSL		FHL OF 1	I/4 SEC								INTERVALS
ELEVATION De	rrick Fl 9	17 ' Gro	und 91	T i Stand D	¶5/13	3/93								ACID/VOLUME
TREE FINISHED	10-22	-93 ¥E	LL COMPLE	TION					LOCATE N	→ / ¯		1		Fracture Treated
ST PROD DATE		_	RECO	P DATE						W	IDN	ńS)		Fluids Amounts
OPERATOR NAME	DEKA	Explo	ratio	on, In	c.	010/000	OPER NO	¹	7408	No.		INIT	ŢΩŧ	TEST DATA
ACDRESS		Box 1												Test Date
LITY	Oklah	oma (ity	STAT	€ OK	7	IP 73]	11	3	_				/day
COMPLETION TY	PE			OIL OR GAS	ZONES					_				vity (API)
O SINGLE ZON				FORMATIONS	i		TO	P	BOTTOM			┝		/day
1) MULTIPLE 20	NE ORDER I	v 0.					1		<u> </u>			├──		Ratio Eu Ft/bbl
COMMINGLED	DRDER NO										•	Water-bbl/day		
LOCATION EXCE	PTION ORDS	CN R								_		<u> </u>		or Flowing
INCREDSED DEN	icity nnnci	D MO										 -		Shut-In Pressur
INCREHSED DEF	OTT GREE					· · · · · · · · · · · · · · · · · · ·						CHOP		
PENALTY										ل		 		IBING PRESSURE
CASING & CEM	NI (Fore	1 06 2C must	be atta	ched)					<u>.</u>	_				
TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	FILLU	p	TCP			A re	?C0?	d of the formati
Conductor							ļ <u> </u>	_		_				ire that I have k ration to make th
Surface	8 5/8	11		320		255	Sur	£	Surf	_		HILL	1h	ne data and facts
Intermediate								\bot		╛		Ιl	/4	me of
Production	1 1/2'	10.	}	3100		190	305	0	2382'		/	7€		
Liner										4	6	ועסח דעסח		D. Box 14
Packer #		Bi and I	Туре			10	TAL DEPT	н	3493'					25/9 4

Type

AND	GAS	CONS	RITUN CUMMISSION ERVATION DIVISION			HEV. 1392
ancea	Jia Cit _i	Thor , Ck	pe Building lahosa 73105-4993	COMPLETION & TEST	DATA BY PRODUCING FORMA	TION GLER 3
-			FORMATION	L Gilcrease		U. Gilcrease
-			SPACING & SPACING ORDER NUMBER	43310 317596		3310 31756
		E	CLASSIFICATION Oil, Gas, Dry, Inj	Dry		Dry
+				2986'-96'		2716'-22'
			PERFORATED INTERVALS			2738'-42'
21-9	7	\	ACID/VOLUME	2000 Gal 7 l/	2% FE-HCL	000 gal 7 l/
VDN	٠.		Fracture Treated	3 gal Lo-9	urf 300	PE-HCL: 1 gal
	11C	#	Fluids Amounts]	o Surf 300
0	ÎN	ITIAL.	TEST DATA			
	In	itial	Test Date			
	01	1-661	/day			
	01	l-Gra	vity (GPPI)			
	Gar	s-MCF	/day			
	Ga	s-011	Ratio Eu Ft/bbl		0	
	Wa	ter-b	bl/day		0,	
	Pumping or Flowing Initial Shut-In Pressure				32	
					9	
	CH	OKE S	IZE			
	FL	ON TU	BING PRESSURE			•

FLON 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 as authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the dath and facts stated herein to be true, correct and complete to the best of my knowledge and belief James L. Nondorf NAME IDRINT OR TYPET 73113 Oklahoma City, P.O. Box 14057 717 CITY STATE **NUDRESS** 405-749-0001 2/25/94 PHONE NUMBER DATE

End Pr Location From Lease, Lr..

or Propert, Line

PLEASE TYPE OR USE BLACK INK ONLY
FORMATION RECOPD
we formation names and three flavariable, or descriptions of thickness of formations of liked through. Show intervals ared on deallstee tested

ared or Cr.lister tested		
NAMES OF FORMATIONS	TOP	EDTTOM
Earlsboro . Inola L. Booch Hartshorne Gilcrease U. Gilcrease L. Gilcrease Wapanuka Union Valley/Crom.	1308' 1594' 2232' 2399' 2612' 2714' 2964' 3161' 3279'	
No.	*	
TD	3493'	

CENSE IMINE			WELL NO
	F	OR	COMMISSION USE DNLY
APPROVED	DISAPPROVED	1)	ITD Section a) No intert to Dr or file
Sh		2)	(1) Serd warring letter (2) Recommend for contempt (3) Recommend for contempt (4) Recommend for contem
WSo		3)	Financial Statement/Letter of Credit/Bond Reject Codes

was an electrical survey	רטי 🔏	Yes	D No	
Date last log was run		10-2	21-93	
was CD2 encountered? D Y	es 🖔 No	a* +	nat depths?	
was HIS encountered? D Y	es KNS	at v	enat depths"	
ke e unusual drilling di 'f ves - d lef y explair	rcuestan	ces er	countered?	ŗ Yes XN.
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640 Acres

gore than two drainholes proposed, attach a arate sheet indicating necessary inforsation

ection must be stated in -ees azzauth

ase note, the horizontal nhole and its end point be located within the ideries of the lease or injury to the Einectional reys' are required for oranholes and prainholes ptional wells

BUILUM	MULE	LUCHITUN	FUK	DIKE	LITUNAL	HULE.
SEC		TWD		·	RGE	

Measured Total Depth

SEC		TWD		RGE	COUNTY	,	
Spot	Location 1/4	1/4	1/4	1/4	Feet From Quarter Se FSL		FWL of 1/4 SECTION
Measu	ired Total	Depth		True	vertical Depth	BHL From Line	Lease, Unit, or Property

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE (DRAINHOLES)

DRAINHOLE #1	SEC		THE	RGE	COUNTY		
Spot Location 1/4	1/4	1/4	1/4	Feet From Quar	ter Section	Lines	FWL of 1/4 SECTION
Depth of Deviat	t10n		Radius of	Turr	Direction		Total Length
Measured Total	Depth		True	Vertical Depth		End Pt	Location From Lease, Unit
DRAINHOLE #2	SEC		Тыр	RGE	COUNTY	<u>-</u>	
Spot Location 1/4	1/4	1/4	1/4	Feet From Quar	ter Section	Lines	FWL of 1/4 SECTION
Depth of Deviat	107		Radius of	Turn	Direction		Tota' Length

True Vertica. Depth

OTC/OCC NUMBER: 17408-0 API NUMBER: 063-23216 APPROVAL DATE: 10/07/93 NOTICE OF INTENTION TO: DRILL

STRAIGHT HOLE SEC: 7
SPOT LOCATION: CSW4 NW4 SW4 TYPE OF DRILLING OPERATION: STRAIGHT HOLE TWP: 09N RGE: 12E

COUNTY: HUGHES

FEET FROM: SOUTH 1/4 SECTION LINE 1650 FEET FROM: WEST 1/4 SECTION LINE 330

FEET FROM THE NEAREST LEASE LINE 330

WELL NO: 1-7 LEASE NAME RANKEL

OPERATOR NAME: DEKA EXPLORATION, INC.

SURFACE OWNER ADDRESS OPERATOR RETURN ADDRESS GLEN RANKEL DEKA EXPLORATION, INC.

P.O.BOX 6205 P.O.BOX 14057

WOODLAND HILLS CA 91365 OKLAHOMA CITY OK 73113

OPERATION TO BEGIN: 10/15/93

FRESH WATER SUPPLY WELL DRILLED: NO SURFACE WATER USED TO DRILL: YES FORMATION CODES, NAMES, DEPTHS, (PERMIT VALID FOR LISTED FORMATIONS ONLY)

** ** OTI		TITLE , DIST *****	/	* * ***	- O-10		V-1-
	404ERLB	EARLSBORO				1310	
	404BOCH	BOOCH				2218	
	404HRSR	HARTSHORNE				2395	
	403GLCR	GILCREASE				2600	
	402WPCK	WAPANUCKA				3117	
	402UNVL	UNION VALLEY				3235	
	402CMWLU	CROMWELL UP				3240	
	202TPCK	TULIP CREEK				3376	
	202VIOL	VIOLA	/1	M, GRO	JP/	4205	
	402CMWI	CROMWELL	, -		,	3310	

SPACING ORDER NUMBERS: 43310 317596

TOTAL DEPTH: 3600

DEPTH TO BASE OF TREATABLE WATER-BEARING FM: 255 GROUND ELEVATION:

SURFACE CASING: 305

PIT INFORMATION:

TYPE OF PIT SYSTEM: ON-SITE

TYPE OF MUD SYSTEM: WATER BASED

EXPECTED CHLORIDE CONTENT OF PIT: MAXIMUM 2500 PPM; AVERAGE 2300 PPM

PIT IS LOCATED IN A HYDROLOGICALLY SENSITIVE AREA

CATEGORY OF PIT(S): 2

LINER NOT REOUIRED FOR CATEGORY: 2 PIT(S)

APPROVED METHOD FOR DISPOSAL OF DRILLING FLUIDS:

EVAPORATION/DEWATER AND BACKFILLING OF RESERVE PIT

THIS PERMIT DOES NOT ADDRESS THE RIGHT OF ENTRY OR SETTLEMENT OF SURFACE DAMAGES. THE DURATION OF THIS PERMIT IS SIX MONTHS, EXCEPT AS OTHERWISE PROVIDED BY RULE OCC-OGR 3-204.

RULE 165: 10-3-4 (E) - THE OPERATOR SHALL GIVE 24 HOURS NOTICE BY TELEPHONE TO THE APPROPRIATE DISTRICT OFFICE OF THE CONSERVATION DIVISION AS TO WHEN SURFACE CASING WILL BE RUN.

K

Spot location of and point from the hericantal spot location of and point from the desirable and the same of control surface and t	├			FRANK	
Heasured True Bottom hole location from Total Depth Vertical Depth lease, unit or property line:		SEC 1#F	ME CO	ONII	
Research True Section hole location from Total Depth Lease, unit or property line:		Spot location		-	ion lines
So. BOTTON BUE LOCATION FOR MUNICIPATIAL BUE (DRAD BURSE) DURAD BOLE 10 DURAD BOLE 10 DURAD BOLE (DRAD BURSE) DURAD BOLE 10 DURAD BOLE (DRAD BURSE) For core than two dravious are reported to be received from the core of the core					
Frain hole \$1. Spect Offer BCE COUNTY BODY BCE COUNTY BODY BCE COUNTY BODY Location of and point Franciscopy Francis		Total Depth	Vertical Depth	lease, unit or	property line:
Sec Spot Location of and point Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 80th line Pest from quarter section from focal Depth Vertical Depth lease, mit or property line; 1/5 1/4 1/4 1/4 80th line Pest from quarter section lines 1/6 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 1/4 1/4 80th line Pest from quarter section lines 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4			ATION FOR HORIZONTAL HOL	e (Drain Holes)	
If more than two derinholes are subject to the subj	<i>c</i> ,				
proposed, stack separate sheet bedden bedden by the moderating the measured Frame From Standard True Rod Point location from True Rod Point Rod Rod Rod Point Location Insection Program Rod Point Direction Rod Point Location From True Rod Point Rod Rod Point Rod Point Rod Rod Point Rod Point Rod Rod Point Rod Rod Point Rod Rod Rod Point Rod			point Feet	from quarter sect:	ion lines
proposed, stack separate sheet bedden bedden by the moderating the measured Frame From Standard True Rod Point location from True Rod Point Rod Rod Rod Point Location Insection Program Rod Point Direction Rod Point Location From True Rod Point Rod Rod Point Rod Point Rod Rod Point Rod Point Rod Rod Point Rod Rod Point Rod Rod Rod Point Rod		2	1/4 1/4 South	line	
Indicating the measure formation from information to the grade of the formation with the legal tourished and its and point and the most be designed within the legal boundaries of the lease or good and the same of the sease of the lease of	If more than two drainholes are proposed, attach separate sheet				
Direction must be stated in Cagree salmuth. The control of the formation of the state of the st	Indicating the necessary			End point local	tion from
regres almosts. Please note: the horizonal state of political process of the sease of political process of the lease of political p			Vertical Depth	lease, unit or	property line:
Please note, the harizontal and described and its and point must be located within the legal boundaries of the lesse or specification must be located within the legal boundaries of the lesse or specific must be boundaries of the less of t	degree szimuth.	STPC TWO	kge cr	UNTY	
be located within the legal Depth of Dadius of Direction Fotal Debundaries of the lease or specing out. Directional surveys are produced for all desirables and desirables	Please note, the harizontal	Spot location of end	point Feet	from quarter secti	ion lines
boundaries of the lease or specing unit. Directional surveys are required for sail desimboles and desimboles an	be located within the legal	Depth of		line Direction	
Some of control wells State Stat					Length
31. AFFIDAVIT FOR ALTERNATIVE CASING PROGRAM (signature on front of form attests to this affidavit) 1. This well will not penetrate any known lost circulation sone. 50 gallons per minute. 1. During the drilling of this well, withdrawals from any water well within 1/4 mile of this well will not exceed 50 gallons per minute. 1. List the following for each water well within 1/4 mile of this well (the information concerning each water well may be obtained through the Oklahoma Water Resources Board, P.O. Box 53585, Oklahoma City, OK 73152). If no water wells are found, please state: Rame of owner/operator Address of owner/operator Location (nearest 1/4 1/4 1/4) Deepest producing interval 4. A cement bond log is required to be run and submitted from not less than 100 ft below the base of the treatable water-bearing formations to the ground surface. **NITENT TO DRILL CHECKLIST** (433/0) 4/Okt (For Oct two Only) **Approved** **Represed** **Repres	required for all drainholes and	Measured			
During the drilling of this well, withdrawals from any water well within 1/4 mile of this well will not exceed 50 gallons per minute. 3. List the following for each water well within 1/4 mile of this well (the information concerning each water well may be obtained through the Oklahoma Water Resources Board, P.O. Box 53585, Oklahoma City, OK 73152). If no water wells are found, please state: Name of owner/operator		V			
Address of owner/operator Location (nearest 1/4 1/4 1/4) Deepest producing interval 4. A cement bond log is required to be run and submitted from not less than 100 ft below the base of the treatable water-bearing formations to the ground surface. NOTENT TO DRILL CHECKLIST 433/0 40cc (For OCC Use Only) Approved Selected C. Outstanding Contampt Order LAUVI. SNOR, TRMN ENG. 1. Surety LAUVI. SNOR, TRMN ENG. 2. Intents LAUVI. SNOR, TRMN ENG. 3. Specing LAUVI. SNOR, TRMN ENG. 4. Surface Clasing Alternative Casing Program 2. Intents LAUVI. SNOR, TRMN ENG. A. Surface Clasing Lauville Casing Program 3. Reactive Casing Alternative Casing Program 4. Results Submitted for Alternative Casing Program 5. Results Submitted for Alternative Casing Program 5. Results Submitted for Alternative Casing Program 6. Results Submitted for Alternative Casing Program 7. Results Submitted for Alternative Casing Program 8. Results Submitted for Alternative Casing Program 8. Results Submitted for Alternative Casing Program 8. Results Submitted for Alternative Casing Program 9. Results Submitted for Alternative Casing Program 1. Surface Note Submitted for Alternative Casing Program 1. Results Submitted for Alternative Casing Program 1. Results Submitted for Alternative Casing Program 1. Results of the Results Submitted for Alternative Casing Program 1. Results Submitted for Alternative Casing P	50 gallons per minute. 3. List the following for a may be obtained through	each water well within the Oklahoma Water !	n 1/4 mile of this well	(the information c	oncerning each water well
4. A cement bond log is required to be run and submitted from not less than 100 ft below the base of the treatable water-bearing formations to the ground surface. INTENT TO DRILL CHECKLIST 433/0 40cc Approved Rejected CMULSOUP, Md/Lwr, WLCX 3	, , , ,		or Iocation (nearest	1/4 1/4 1/4) D	eepest producing interval
4. A cement bond log is required to be run and submitted from not less than 100 ft below the base of the treatable water-bearing formations to the ground surface. RETENT TO DRILL CHECKLIST 433/0/40cc (For OCC Use Only) Approved Bejorted 1. Surety A. Hone field B. Expired date C. Outstanding Contampt Order LUNIL S.D. LLP, Mcl. LLV, SNOR, TRMN EACH C. Outstanding Contampt Order LUNIL SNOR, TRMN EACH LUNIL SNOR, TRMN EACH A. Surface Casing 1. Insufficient Alternative Casing Program 2. Insufficient Alternative Casing Program 3. Specing 3. Specing 1. Insufficient Alternative Casing Program 3. Hos Affidents Submitted for Alternative Casing Program 4. Surface National State of the S	all of owner/operator				
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## Continued of the ground surface. Surface Continued					
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Approved 1. Surety A. Horse filed B. Expired date C. Outstanding Contempt Order LUVL SNOR, TRMN GRU 2. Intents LUAPK VIOL 3. Specing 4. Gaology A. Surface Casing 1. Insufficient assessit, requires 2. Insufficient Afternative Casing Program 3. No Affect Submitted for Afternative Casing Program 3. Resentry, requires 3. Resentry, requires 4. Resentry, requires 5. Resentry program current 6. Surface To Michael Submitted for Afternative Casing Program 7. Surface To Michael Submitted for Afternative Casing Program 8. Resentry, requires 9. Reserved Specific Order No. 1. Square pottern, 8, 16, 81, 183, 184, 346 1. Square pottern, 8, 20, 80, 220 1. Square pottern, 9, 10, 81, 183, 184, 346 1. Square pottern, 9, 10, 81, 183, 184, 346 1. Square pottern, 9, 10, 81, 183, 184, 346 1. Square pottern, 9, 10, 81, 183, 184, 346 1. Square pottern, 9, 10, 81, 183, 184, 346 1. Square pottern, 9, 10, 82, 1			inputitied from not less	than 100 It below	the base of the freathole
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arity ft. from N/S and from E/W line C. Special Spacing Order No. 1. Square pettern, 24, 16, 45, 158, 54e 2. Rectangular pettern, 5, 26, 86, 326 NW/SE or NE/SW 3. Rectangular plottern; 5, 26, 86, 326 prior to 1971 (Y, N) SU/LD D. Location Exception 1. Square pettern; 5, 26, 86, 326 prior to 1971 (Y, N) SU/LD D. Location Exception 1. Surface hole location different 2. Bottom hole location different	replace To hip Creek or MC19/1/93	2. Into	cing legy Surface Casing	<u> </u>	IL, SNOR, TRMNERU
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E. Pending Application Specing/Location Exception C.D. No: H O M Date F Operator Name different in order No Name on Order Lecation Exception/Increase Dansity/Peeling C Increase Dansity/Location Exception Order expired date M Outline lease or property boundary lines	Aucle/1/93	2. Inte	cing Surface Casing 1. Insufficient assumt, requires 2. Insufficient Afternetive Casing 3. No Afficient Afternetive Casing 3. No Afficient Afternetive Casing 4. Reantry, requires Unapaced less then 2566 ft. (158 senly ft. fress N/S and Spaced Spacing Order No. 1. Square pattern, 21, 16, 45, 11 2. Rectangular pattern; 5, 20, 36 NW/SE or NE/SW 3. Rectangular slot pattern; 5, 20 prior to 1971 (Y,N) SU/LD	ft Program prostive Casing Program current t, enly ")/more than 2566 ft (336" from E/W line (3, 546), 226	0032
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S Sincrease Density / Lecation Exception / Increase Density / Lecation Exception G Sincrease Density / Lecation Exception Order expired date H Outline lease or property boundary lines	Case: 09/23/1993 The Case: 09/23/1993 The Case: 000000000 Payor: DEXA EXPLORATION 46 Intent to Drill	2. Interest of the second seco	cing Surface Casing 1. Insufficient ensunt, requires 2. Insufficient Alternative Casing 3. Ne Affidavit Submitted for Alte 8. Reentry, requires Unspeced less than 2500 ft. (163 enly 6. from N/5 and 8-pacing Order No. 1. Squere pattern, 2), 10, 48, 11 2. Rectangular pattern, 5, 20, 50 NW/SE or NE/SW 3. Rectangular slot pattern; 5, 20 prior to 1971 (Y,N) SU/LD Location Exception 1. Surface hole location different Panding Application Specing/Loc C.D. No : 1 O M Date	ft Fregree Fregree Fregree Fregree Fregree Fregree Free F	0032
Order expired date H Outline lease or property boundary lines ,	Case: 09/23/1993 The Case: 09/23/1993 The Case: 000000000 Payor: DEXA EXPLORATION 46 Intent to Drill	2. Interest of the second seco	cing Surface Casing 1. Insufficient assumt, requires 2. Insufficient Afternative Casing 3. No Afficient Afternative Casing 4. Rectangular pattern, 2, 10, 45, 11 2. Rectangular pattern, 8, 20, 30 MW/SE or NE/SW 3. Rectangular slot pattern; 8, 20 prior to 1971 (7, M) SU/L.D Location Exception 1. Surface hole location different Pending Application Specing/Loc C.D. No : H O M Date Operator Name different in order In Name on Order	ft Fregree Fre	0032
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