

**PLUGGING RECORD**

OAC 165:10-1-10

**WELL INFORMATION**

**Plug Date: February 23, 2016**

**API No:** 35125238120000

**Well #:** 1-16WV

**Well Name:** STATE

**Operator:** JOLEN OPERATING COMPANY

**Operator #:** 11403

**Section:**

**Township:**

**Range:**

**Meridian:**

**1/4:**

**1/4:**

**1/4:**

**1/4:**

**Total Depth:** 5172

**Base of Treatable Water:** 950

**Well Classification:** GAS

**CONTACT INFORMATION**

**Contact Name:** Brad Williams

**Telephone:** 4052700066

**Address 1:** 100 N BROADWAY AVE STE 2460

**Address 2:**

**City:** OKLAHOMA  
CITY

**State:** O  
K

**Zipcode:** 73102-  
8829

**Country:** US

**Email Address:**

**Fax:**

**PIPE RECORDS**

String Name	Size	Run	Pulled
SURACE	8.625	1069	0
PRODUCTION	5.5	5172	2126

**PERFORATION DEPTHS**

From Depth	To Depth
4975	4985

**PLUGS**

Plug Type	Hole Size	Depth	No. Sacks of Cement	Slurry Volume	Calculated TOC	Top of Plug
CIBP	5.5	4899	10	2	4800	0
CEM	5.5	2145	40	8	2045	0
CEM	8.625	1170	100	22	870	891
CEM	8.625	500	30	6	400	0
CEM	8.625	64	20	5	3	3

**Remarks:** SET 5.5" CIBP @ 4899'. CAP W/ 10 SKS CMT. CIRC HOLE W/ MUD. CUT CSG @ 2126'. SPOT 40 SKS @ 2145. SPOT 100 SKS @ 1170' WOC. WAG TOC @ 891'. SPOT 30 SKS @ 500'. TOP OUT 64'-4" W/2- SKS. CUT OFF WELLHEAD 4' BLG \* CAP W/ ID PLATE

**Reason For Plugging:** NON-COMMERCIAL

**CEMENTER CERTIFICATION INFORMATION**

**Name:**

**Title:**

**Company Name:** ORR ENTERPRISES, INC.

**Permit No:** 825

**Address 1:**

**Address 2:** P.O. Box 1706

**City:** DUNCAN

**State:** OK

**Zipcode:** 73534

**Phone:** (580) 251-9618

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.

Electronic Signature: JOLEN OPERATING COMPANY

TYPE OR USE BLACK INK  
SEE REVERSE FOR INSTRUCTIONS

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

Form 1003/1003C  
Rev. 2015

API NO. 125-23812  
OTC PROD. UNIT NO.  
PLUGGING DATE 2/23/16

PLUGGING RECORD  
OAC 165:10-11-7

(PLEASE SEE INSTRUCTIONS ON BACK PAGE)

Well Name/No. STATE # 1-16 WV  
Location E2 1/4 SE 1/4 SW 1/4 SW 1/4 Sec 16 Twp 9N Rge 3E  
Ft FSL of 1/4 Sec Ft FWL of 1/4 Sec County POTTAWATOMIE  
Total Depth 5172' Base of Treatable Water 950' Well Classification OIL


OPERATOR

Name JOLEN OPERATING COMPANY OTC/OCC No. 11403  
Address 100 N. BROADWAY AVE., SUITE 2460 Phone 405-235-8444  
City OKLAHOMA CITY State OKLAHOMA Zip 73102 - 8829

PIPE RECORD

Size	Run (ft)	Pulled (ft)	Conductor
8 5/8"	1069'	0	Surface
			I.C.
			I.C.
5 1/2"	5172'	2126'	P.C.
			Lnr.

PERFORATION DEPTHS

Set 1 -	From 4975'	To 4985'
Set 2 -	From	To
Set 3 -	From	To
Set 3 -	From	To

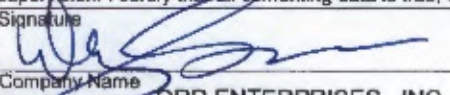
Plug	Type of Plug	Hole Size or Pipe Size	Depth	No. Sacks Cement	Slurry Volume	Calculated TOC	Measured Top of Plug If Tagged
1	CIBP	5 1/2"	4899'	10	2 BBL	4800'	
2	CEMENT	5 1/2" & O.H.	2145'	40	8 BBL	2045'	
3	CEMENT	8 5/8" & O.H.	1170'	100	22 BBL	870'	891'
4	CEMENT	8 5/8"	500'	30	6 BBL	400	
5	CEMENT	8 5/8"	64'	20	5 BBL	SURFACE	SURFACE

REMARKS

Set 5 1/2" cibp @ 4899'. Cap w/ 10 sks cmt. Circ hole w/ mud. Cut csg @ 2126'. Spot 40 sks @ 2145'. Spot 100 sks @ 1170' woc.  
Tag toc @ 891'. Spot 30 sks @ 500'. Top out 64'-4' w/ 20 sks. Cut off wellhead 4' bgl & cap w/ I.D. Plate  
Reason for Plugging Non-commercial.

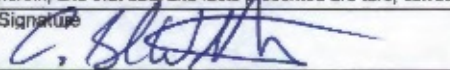
CEMENTER CERTIFICATION

I certify that the cement plugs were placed in this well as shown on this report, per OCC instructions. The cementing was performed by me or under my direct supervision. I certify that all cementing data is true, correct and complete.

Signature  Date 2/23/16 Name and Title Typed or Printed DOUG SMITH - REGIONAL MANAGER  
Company Name ORR ENTERPRISES, INC. Permit No. 825  
Address P.O. BOX 1706 Phone 580-251-9618  
City DUNCAN State OKLAHOMA Zip 73534

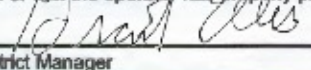
OPERATOR CERTIFICATION

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 herein, and that data and facts presented are true, correct, and complete to the best of my knowledge. This covers all well data and information presented herein.

Signature  Date 3-14-16 Name and Title Typed or Printed C. Brad Williams, Vice President

CORPORATION COMMISSION USE ONLY

By signing this form, the District Manager has approved the contents thereof as to form only. Said District Manager does not warrant the facts provided by the operator are true or that the operator has properly plugged the described well.

Signature of District Manager  Field Inspector

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.: 35125238120001

**Completion Report**

Spud Date: August 09, 2013

OTC Prod. Unit No.: 125-212825-0-0000

Drilling Finished Date: August 28, 2013

**Amended**

1st Prod Date: April 10, 2014

Amend Reason: SEE REMARKS

Completion Date: December 31, 2013

Recomplete Date: June 01, 2015

**Drill Type: STRAIGHT HOLE**

Min Gas Allowable: Yes

Well Name: STATE 1-16WV

Purchaser/Measurer: ENERFIN

Location: POTTAWATOMIE 16 9N 3E  
E2 SE SW SW  
330 FSL 1100 FWL of 1/4 SEC  
Derrick Elevation: 1022 Ground Elevation: 1011

First Sales Date: 04/01/2014

Operator: JOLEN OPERATING COMPANY 11403

100 N BROADWAY AVE STE 2460  
OKLAHOMA CITY, OK 73102-8829

Completion Type	
X	Single Zone
	Multiple Zone
	Commingled

Location Exception	
Order No	
616269	

Increased Density	
Order No	
There are no Increased Density records to display.	

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE	8.625	24	J-55	1069	600	510	SURFACE
PRODUCTION	5.5	17	N-89	5164	1900	110	4400

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

**Total Depth: 5172**

Packer	
Depth	Brand & Type
There are no Packer records to display.	

Plug	
Depth	Plug Type
5005	CIBP

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
Jan 24, 2014	WOODFORD	55	42	80	1454	50	PUMPING	570		32
Jun 01, 2015	WOODFORD			5		30	PUMPING	470		30

Completion and Test Data by Producing Formation									
Formation Name: WOODFORD				Code: 319WDFD			Class: DRY		
Spacing Orders				Perforated Intervals					
Order No		Unit Size		From			To		
612670		640		5020			5026		
Acid Volumes				Fracture Treatments					
2,000 GALLONS 15% HCL				71,324 GALLONS FLUID, 69,240 POUNDS 20/40 SAND					

Formation Name: WOODFORD		Code: 319WDFD		Class: GAS	
Spacing Orders		Perforated Intervals			
Order No	Unit Size	From		To	
612670	640	4975		4985	
Acid Volumes		Fracture Treatments			
2,000 GALLONS 15% HCL		5,500 BARRELS WATER, 75,000 POUNDS 70/40 SAND			

Formation	Top
WOODFORD	4960

Were open hole logs run? Yes

Date last log run: August 21, 2013

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks
REASONS FOR AMENDING FORM 1002A: 1. TO CORRECT THE DEPTH FOR THE TOP OF CEMENT ON THE PRODUCTION CASING. A. - THE DEPTH FOR THE TOP OF CEMENT WAS REPORTED INCORRECTLY AT 5,172'. AS AMENDED, THE DEPTH FOR THE TOP OF CEMENT SHOULD BE 4,400'. 2. TO ADD PERFORATIONS TO THE WOODFORD FORMATION. A. - ON MAY 4, 2015, SET CIBP AT 5,005'; ADDITIONAL PERFORATIONS IN WOODFORD AT 4,975' - 4,985'. 3. TO CORRECT THE TOP OF FORMATION DEPTH ON PAGE 2. A. - ON ORIGINAL FORM, THE DEPTH WAS 5,020'; CORRECTED TO 4,960'.

**FOR COMMISSION USE ONLY**

1131603

Status: Accepted

OKLAHOMA CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
P.O. BOX 52000  
OKLAHOMA CITY, OK 73152-2000  
(Rule 165:10-3-1)

API NUMBER: 125 23812

Approval Date: 05/28/2013

Expiration Date: 11/28/2013

Straight Hole

Oil & Gas

PERMIT TO DRILL

WELL LOCATION: Sec: 16 Twp: 9N Rge: 3E

County: POTTAWATOMIE

SPOT LOCATION:

E2

SE

SW

SW

FEET FROM QUARTER: FROM

SOUTH

FROM

WEST

SECTION LINES:

330

1100

Lease Name: STATE

Well No: 1-16WV

Well will be 330 feet from nearest unit or lease boundary.

Operator  
Name: JOLEN OPERATING COMPANY

Telephone: 4052358444

OTC/OCC Number: 11403 0

JOLEN OPERATING COMPANY  
100 N BROADWAY AVE STE 2460  
OKLAHOMA CITY, OK 73102-8829

COMMISSIONERS OF THE LAND OFFICE-STATE OF  
OKLAHOMA  
120 N. ROBINSON, SUITE 1000W  
OKLAHOMA CITY OK 73102

Formation(s) (Permit Valid for Listed Formations Only):

	Name	Depth	Name	Depth
1	MISSISSIPPIAN	4600	6	
2	WOODFORD	4700	7	
3	HUNTON	4800	8	
4			9	
5			10	

Spacing Orders: No Spacing

Location Exception Orders:

Increased Density Orders:

Pending CD Numbers: 201302783  
201302784

Special Orders:

Total Depth: 5200

Ground Elevation: 1013

**Surface Casing: 1030**

Depth to base of Treatable Water-Bearing FM: 980

Under Federal Jurisdiction: No

Fresh Water Supply Well Drilled: No

Surface Water used to Drill: Yes

PIT 1 INFORMATION

Approved Method for disposal of Drilling Fluids:

Type of Pit System: CLOSED Closed System Means Steel Pits

Type of Mud System: WATER BASED

Chlorides Max: 5000 Average: 3000

Is depth to top of ground water greater than 10ft below base of pit? Y

Within 1 mile of municipal water well? N

Wellhead Protection Area? N

Pit is located in a Hydrologically Sensitive Area.

Category of Pit: C

Liner not required for Category: C

Pit Location is BED AQUIFER

Pit Location Formation: OSCAR

D. One time land application -- (REQUIRES PERMIT)

PERMIT NO: 13-23474

H. CLOSED SYSTEM=STEEL PITS PER OPERATOR OPTION

Notes:

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 165: 10-3-1.  
Rule 165: 10-3-4 (c) (7) (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.

Category	Description
PENDING CD - 201302783	5/28/2013 - G30 - (640) 16-9N-3E EST MSSP, WDFD, HNTN REC 5/21/13 (NORRIS)
PENDING CD - 201302784	5/28/2013 - G30 - 16-9N-3E X201302783 MSSP, WDFD, HNTN 330 FSL, 1100 FWL NO OP. NAMED REC 5/21/13 (NORRIS)



**OKLAHOMA CORPORATION COMMISSION**

Oil &amp; Gas Conservation Division

Post Office Box 52000

Oklahoma City, Oklahoma 73152-2000

Form 1001A

Rev. 2012

SPUD  
DATE 8/09/2013\* (state the **EXACT DATE**  
that the well was spudded)**NOTIFICATION OF WELL SPUD**

(OAC 165:10-3-2)

**OPERATOR**

Name JOLEN OPERATING COMPANY		OTC/OCC Operator No. 11403
Address 100 N. BROADWAY, SUITE 2460		Phone No. (405) 235-8444
City OKLAHOMA CITY	State OK	Zip 73102

**WELL**

Name/No. STATE 1-16WV		API No. 35-125-23812 ✓					
-	SE	1/4	SW	1/4	SW	1/4	
Sec. 16	Twp. 9N	Rge. 3E	County POTTAWATOMIE				

**CORRESPONDENCE SHOULD BE MAILED TO**

Name JOLEN OPERATING COMPANY c/o JANA E GORMAN		
Address 100 N. BROADWAY, SUITE 2460		
City OKLAHOMA CITY	State OK	Zip 73102

**SURFACE CASING CEMENTED BY** (if job completed)

Name HALLIBURTON ENERGY SERVICES		
Address 215 E. BOID D'ARC		Phone No. (580) 251-2800
City DUNCAN	State OK	Zip 73533
Date Cemented 8/11/2013		

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

BRAD WILLIAMS

Print or Type Name and Title

**RECEIVED**

AUG 20 2013

**OKLAHOMA CORPORATION  
COMMISSION**

(405) 235-8444

Phone No.

Note: The district manager or field inspector shall be notified at least twenty-four (24) hours in advance, prior to commencing spudding operations.

<b>DISTRICT I</b> 115 West 6th Street Post Office Box 779 Bristow, OK 74010-0779 (918) 367-3396 OGBristowOffice@occcemail.com
--

<b>DISTRICT II</b> 101 South 6th Street Post Office Box 1107 Kingfisher, OK 73750-1107 (405) 375-5570 OGKingfisherOffice@occcemail.com
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<b>DISTRICT III</b> 1020 Willow Street Post Office Box 1525 Duncan, OK 73533 (580) 255-0103 OGDuncanOffice@occcemail.com
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<b>DISTRICT IV</b> 1400 Hoppe Blvd. Suite "D" Ada, OK 74820-3437 (580) 332-3441 OGAdaOffice@occcemail.com
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API No. <b>35-125-23812</b>
OTC/OCC Operator No.

**CEMENTING REPORT**  
To Accompany Completion Report

Form 1002C  
Rev. 1996

**OKLAHOMA CORPORATION COMMISSION**  
Oil & Gas Conservation Division  
Post Office Box 52000-2000  
Oklahoma City, Oklahoma 73152-2000  
OAC 165:10-3-4(h)

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	OCC District
*Operator <b>JOLEN OPERATING COMPANY</b>	OCC/OTC Operator No <b>11403</b>
*Well Name/No. <b>State 1-16 WV</b>	County <b>Pottawatomie</b>
*Location <i>SE 1/4 SEC 16 T14S R9E SW 1/4</i>	Sec <b>16</b>
	Twp <b>9N</b>
	Rge <b>3E</b>

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date		8/11/2013				
*Size of Drill Bit (Inches)		12.25				
*Estimated % wash or hole enlargement used in calculations		100				
*Size of Casing (inches O.D.)		8.625				
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level		1069.4				
Type of Cement (API Class)		A				
In first (lead) or only slurry		A				
In second slurry		A				
In third slurry						
Sacks of Cement Used		360				
In first (lead) or only slurry		150				
In second slurry						
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.)		694.8				
In first (lead) or only slurry		177				
In second slurry						
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)		SURFACE				
Cement left in pipe (ft)		42.29				

*Amount of Surface Casing Required (from Form 1000)	ft.
---	-----

*Was cement circulated to Ground Surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*Was Cement Bond Log run?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth?	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

**Stage #1/Slurry #1:** Fresh Water

**Stage #1/Slurry #2:** Lead Cement w/ EXTENDACEM (TM) SYSTEM, 6 % Halliburton Gel, 1 % Calcium Chloride, Pellet, 0.25 lbm Poly-E-Flake.


**Stage #1/Slurry #3:** Tail Cement w/ HALCEM (TM) SYSTEM, 0.125 lbm Poly-E-Flake.

**Stage #1/Slurry #4:** Displacement

\*Remarks

**CEMENTING COMPANY**

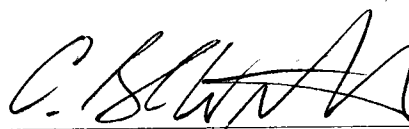
I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.



Signature of Cementer or Authorized Representative

**OPERATOR**

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 true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.



Signature of Operator or Authorized Representative

Name & Title Printed or Typed

**DANIEL BRISCO, Service Supervisor**

**Halliburton Energy Services**

Address

**215 E BOID D'ARC**

City

**DUNCAN**

State

**OK**

Zip

**73533**

Telephone (AC) Number

**251-251-2800**

Date

**8/11/2013**

\*Name & Title Printed or Typed

**Brad Williams, Vice Pres.**

\*Operator

**Solen Operating Company**

\*Address

**100 N. Broadway, Suite 2460**

\*City

**Oklahoma City**

\*State

**OK**

\*Zip

**73102**

\*Telephone (AC) Number

**(405) 235-8444**

\*Date

**4-29-14**

# **INSTRUCTIONS**

- 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.
  - An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
  - The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
- 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 CORPORATION COMMISSION RULES.**

API No. <b>35-125-23812</b>
OTC/OCC Operator No.

**CEMENTING REPORT**  
To Accompany Completion Report

Form 1002C  
Rev. 1996

**OKLAHOMA CORPORATION COMMISSION**  
Oil & Gas Conservation Division  
Post Office Box 52000-2000  
Oklahoma City, Oklahoma 73152-2000  
OAC 165:10-3-4(h)

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			OCC District		
*Operator <b>JOLEN OPERATING COMPANY</b>			OCC/OTC Operator No <b>11403</b>		
*Well Name/No. <b>State 1-16 WV</b>			County <b>Pottawatomie</b>		
*Location <b>State 1-16 WV SW 1/4</b>	Sec <b>16</b>	Twp <b>9N</b>	Rge <b>3E</b>		

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date					<b>8/21/2013</b>	
*Size of Drill Bit (Inches)					<b>7.875</b>	
*Estimated % wash or hole enlargement used in calculations					<b>30</b>	
*Size of Casing (inches O.D.)					<b>5.5</b>	
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level					<b>5172</b>	
Type of Cement (API Class) In first (lead) or only slurry					<b>50/50 POZ</b>	
In second slurry						
In third slurry						
Sacks of Cement Used In first (lead) or only slurry					<b>110</b>	
In second slurry						
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry					<b>146.3</b>	
In second slurry						
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)					<b>622</b>	
Cement left in pipe (ft)					<b>42</b>	

*Amount of Surface Casing Required (from Form 1000)	ft.
---	-----

*Was cement circulated to Ground Surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*Was Cement Bond Log run?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth?	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

**Stage #1/Slurry #1:** MUD FLUSH III

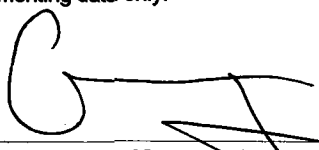
**Stage #1/Slurry #2:** ECONOCЕМ w/ ECONOCЕМ (TM) SYSTEM, 0.2 % CFR-3, 0.1 % SA-1015, 0.5 lbm Poly-E-Flake, 0.5 % Halad(R) 344.

**Stage #1/Slurry #3:** 3% CLAY-WEB DISPLACEMENT w/ 0.75 gal/Mgal CLA-WEB.

\*Remarks

**CEMENTING COMPANY**

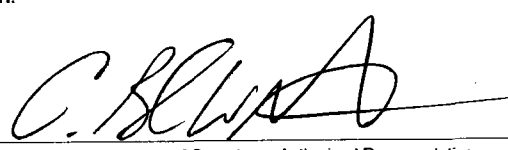
I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.



Signature of Cementer or Authorized Representative

**OPERATOR**

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 true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.



Signature of Operator or Authorized Representative

Name & Title Printed or Typed

**GREGORY FLOYD, Service Supervisor**

**Halliburton Energy Services**

Address

**215 EAST BOIS D'ARC**

City

**DUNCAN**

State

**OK**

Zip

**73533**

Telephone (AC) Number

**580-251-2800**

Date

**8/21/2013**

\*Name & Title Printed or Typed

**Brad Williams, Vice Pres.**

\*Operator

**Jolen Operating Company**

\*Address

**100 N. Broadway, Suite 2460**

\*City

**Oklahoma City**

\*State

**OK**

\*Zip

**73102**

\*Telephone (AC) Number

**(405) 235-8444**

\*Date

**4-29-14**

# **INSTRUCTIONS**

- 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.

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

C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
- 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 CORPORATION COMMISSION RULES.**

**THE FLEISCHAKER COMPANIES**  
**JOLEN OPERATING COMPANY**

April 30, 2014

Oklahoma Corporation Commission  
Oil & Gas Conservation Division  
PO Box 52000  
Oklahoma City, OK 73152-2000

RE: Completion Report for State 1-16WV

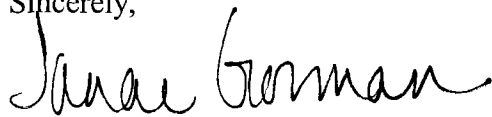
Dear Sir or Madam:

Please find enclosed the Completion Report (Form 1002A) and Cement Reports (Forms 1002C) for the State 1-16WV well.

If you have any questions or need any additional information, please feel free to contact me at (405) 235-8444 x13.

Thank you for your time and consideration in this matter.

Sincerely,

A handwritten signature in black ink that reads "Janae Gorman". The signature is written in a cursive, flowing style.

Janae Gorman

Enclosures

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.: 35125238120000

**Completion Report**

Spud Date: August 09, 2013

OTC Prod. Unit No.: 125-212825-0-0000

Drilling Finished Date: August 28, 2013

1st Prod Date: April 10, 2014

Completion Date: December 31, 2013

**Drill Type: STRAIGHT HOLE**

Min Gas Allowable: Yes

Well Name: STATE 1-16WV

Purchaser/Measurer: ENERFIN

Location: POTTAWATOMIE 16 9N 3E  
E2 SE SW SW  
330 FSL 1100 FWL of 1/4 SEC  
Derrick Elevation: 1022 Ground Elevation: 1011

First Sales Date: 04/20/2014

Operator: JOLEN OPERATING COMPANY 11403

100 N BROADWAY AVE STE 2460  
OKLAHOMA CITY, OK 73102-8829

Completion Type	
X	Single Zone
	Multiple Zone
	Commingled

Location Exception
Order No
612997

Increased Density
Order No
There are no Increased Density records to display.

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE	8.625	24	J-55	1069	600	510	SURFACE
PRODUCTION	5.5	17	N-89	5172	1900	110	622

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

**Total Depth: 5172**

Packer	
Depth	Brand & Type
There are no Packer records to display.	

Plug	
Depth	Plug Type
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
Jan 24, 2014	WOODFORD	55	42	80	1455	50	PUMPING	570		32

Completion and Test Data by Producing Formation														
Formation Name: WOODFORD	Code: 319WDFD	Class: OIL												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Spacing Orders</th> </tr> <tr> <th>Order No</th> <th>Unit Size</th> </tr> </thead> <tbody> <tr> <td>612670</td> <td>640</td> </tr> </tbody> </table>		Spacing Orders		Order No	Unit Size	612670	640	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Perforated Intervals</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>5020</td> <td>5026</td> </tr> </tbody> </table>	Perforated Intervals		From	To	5020	5026
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Acid Volumes														
2,000 GALLONS 15% HCL														
Fracture Treatments														
71,324 GALLONS FLUID, 69,240 POUNDS 20/40 SAND														

Formation	Top
WOODFORD	5020

Were open hole logs run? Yes  
Date last log run: August 21, 2013

Were unusual drilling circumstances encountered? No  
Explanation:

<b>Other Remarks</b>
There are no Other Remarks.

FOR COMMISSION USE ONLY	
Status: Accepted	1124207



API NO. 125-23812  
OTC PROD.  
UNIT NO. 125-212825-0-0000

PLEASE TYPE OR USE BLACK INK OR  
NOTE:  
Attach copy of original 1002A  
if recompletion or reentry.

**AS SUBMITTED**

**RECEIVED**

Form 1002A  
Rev. 2009

**MAY 01 2014**

☒ ORIGINAL  
☐ AMENDED (Reason) \_\_\_\_\_

Rule 165:10-3-25

**OKLAHOMA CORPORATION  
COMMISSION**

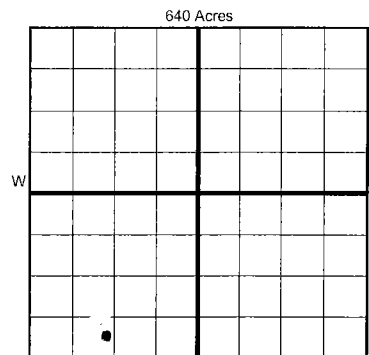
**COMPLETION REPORT**

**TYPE OF DRILLING OPERATION**

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

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

COUNTY	Pottawatomie	SEC	16	TWP	9N	RGE	3E	SPUD DATE	8/9/2013
LEASE NAME	State	WELL NO.	1-16WV	DRLG FINISHED DATE	8/28/2013	DATE OF WELL COMPLETION	12/31/2013	1st PROD DATE	4/10/2014
ELEVATION Derrick	1,022'	Ground	1,011'	FSL OF 1/4 SEC	330	FWL OF 1/4 SEC	1,100	RECOMP DATE	
OPERATOR NAME	Jolen Operating Company	Latitude (if known)	N 35.247076197	Longitude (if known)	W 96.997001590	OTC/OCC OPERATOR NO.	11403		
ADDRESS	100 N. Broadway, Suite 2460								
CITY	Oklahoma City	STATE	OK	ZIP	73102				



LOCATE WELL

**COMPLETION TYPE**

<input checked="" type="checkbox"/> SINGLE ZONE
<input type="checkbox"/> MULTIPLE ZONE
Application Date
<input type="checkbox"/> COMMINGLED
Application Date
LOCATION EXCEPTION ORDER
INCREASED DENSITY ORDER NO.
616269
n/a

**CASING & CEMENT (Form 1002C must be attached)**

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	8.625	24	J-55	1,069.4'	600	510	surface
INTERMEDIATE							
PRODUCTION	5.5	17	N-89	5,164	1,900	110	5,172'
LINER							
TOTAL DEPTH							5,172'

PACKER @ \_\_\_\_\_ BRAND & TYPE \_\_\_\_\_ PLUG @ \_\_\_\_\_ TYPE \_\_\_\_\_ PLUG @ \_\_\_\_\_ TYPE \_\_\_\_\_  
PACKER @ \_\_\_\_\_ BRAND & TYPE \_\_\_\_\_ PLUG @ \_\_\_\_\_ TYPE \_\_\_\_\_ PLUG @ \_\_\_\_\_ TYPE \_\_\_\_\_

**COMPLETION & TEST DATA BY PRODUCING FORMATION**

FORMATION	Woodford								
SPACING & SPACING ORDER NUMBER	612670								
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	Oil								
PERFORATED INTERVALS	5,020' - 5,026'								
ACID/VOLUME	2,000 gal; 15% HCL								
FRACTURE TREATMENT (Fluids/Prop Amounts)	71,324 gal fluid								
	69,240# 20/40 sand								



Min Gas Allowable (165:10-17-7)  
OR  
Oil Allowable (165:10-13-3)

Gas Purchaser/Measurer  
First Sales Date

Enerfin  
4/2014

**INITIAL TEST DATA**

INITIAL TEST DATE	1/24/2014						
OIL-BBL/DAY	55						
OIL-GRAVITY ( API)	42						
GAS-MCF/DAY	80						
GAS-OIL RATIO CU FT/BBL	1,454						
WATER-BBL/DAY	50						
PUMPING OR FLOWING	pumping						
INITIAL SHUT-IN PRESSURE	570 psi						
CHOKE SIZE	n/a						
FLOW TUBING PRESSURE	32 psi						

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	NAME (PRINT OR TYPE)	DATE	PHONE NUMBER
	Brad Williams	4-30-14	(405) 235-8444
100 N. Broadway, Suite 2460	Oklahoma City OK 73102	operations@jolen.com	
ADDRESS	CITY STATE ZIP	EMAIL ADDRESS	

Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

WELL NO. 1-16WV

NAMES OF FORMATIONS	TOP

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 ☐ no

Date Last log was run 8/21/2013

Was CO<sub>2</sub> encountered? ☐ yes ☒ no at what depths? \_\_\_\_\_

Was H<sub>2</sub>S encountered? ☐ yes ☒ no at what depths? \_\_\_\_\_

Were unusual drilling circumstances encountered? ☐ yes ☒ no


If yes, briefly explain below

Other remarks:

640 Acres

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.

640 Acres



The diagram shows a large square divided into four equal quadrants by a thick horizontal line and a thick vertical line. Each quadrant is further divided into a 5x5 grid of smaller squares. The top-left quadrant is shaded gray. The text "640 Acres" is centered above the grid.

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:			

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

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

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