

131-05197

API NO. **NA**
 OTC PROD. UNIF. NO.

Rule 165-10-3-25
 ORIGINAL
 AMENDED
 Reason Amended **NO 1002A ON FILE AT OCC**

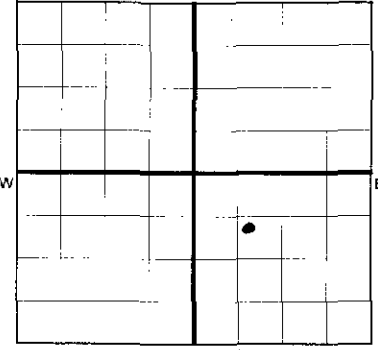
COMPLETION REPORT
OKLAHOMA CORPORATION COMMISSION
 Oil & Gas Conservation Division
 Post Office Box 52000-2000
 Oklahoma City, Oklahoma 73152-2000

Form 1002A
 Rev. 1996

404 **BRVL** 509282006

PLEASE TYPE OR USE BLACK INK ONLY
 NOTE: Attach copy of original 1002A if recompletion or reentry
 TYPE OF DRILLING OPERATION
 STRAIGHT HOLE DIRECTIONAL HOLE HORIZONTAL HOLE
 If directional or horizontal, see reverse for bottom hole location.

COUNTY **ROGERS** SEC **11** TWP **23N** RGE **17E**
 LEASE NAME **GULLEY** WELL NO. **1-I**
 SHL **NW SE NW SE** 1815' FSL 825' FWL OF 1/4 SEC
 ELEVATION _____ SPUD DATE _____
 Derrick Fl _____ Ground _____ **NA**
 DRLG FINISHED **NA** WELL COMPLETION _____ **NA**
 1ST PROD DATE _____ RECOMP DATE _____



FORMATION	BARTLESVILLE
SPACING & SPACING ORDER NUMBER	NONE
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp	TO BE CONVERTED TO A DISPOSAL WELL
PERFORATED INTERVALS	
ACID/VOLUME	
Fracture Treated?	
Fluids Amounts	

OPERATOR NAME **WELL RENEWAL, INC.** OTC/OCC OPERATOR NO. **21782**
 ADDRESS **P.O. BOX 91**
 CITY **CHELSEA** STATE **OK** ZIP **74016**

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

OIL OR GAS ZONES FORMATIONS	TOP	BOTTOM
Bartlesville	130	

CASING & CEMENT (Form 1002C must be attached)								
TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	FILLUP	TOP
Conductor								
Surface								
Intermediate								
Production	4 1/2"			705		20	164	SURFACE
Liner								

PACKER @ _____ BRAND & TYPE _____ TOTAL DEPTH **164'**
 PBT
 PLUG @ _____ TYPE _____

INITIAL TEST DATA	
INITIAL TEST DATE	NA
OIL-BBL/DAY	
OIL-GRAVITY (API)	
GAS-MCF/DAY	
GAS-OIL RATIO CU FT/BBL	
WATER-SS/DAY	
PUMPING OR FLOWING	
INITIAL SHUT-IN PRESSURE	
CHOKE SIZE	
FLOW TUBING PRESSURE	

A record of the formations drilled through, and pertinent remarks are presented on the reverse. I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct, and complete to the best of my knowledge and belief.

William W. Gray *William W. Gray*
 SIGNATURE NAME (PRINT OR TYPE)
WELL RENEWAL, INC **DEPT. BRANCH**
P.O. BOX 91 **CHELSEA** **OK** **74016**
 ADDRESS CITY STATE ZIP
9/23/2005 **918-231-8085**
 DATE PHONE NUMBER

FORMATION RECORD

Give formation names and tops, if available, or descriptions and thickness of formations LEASE NAME

GULLEY

WELL NO. 1-1

drilled through. Show intervals cored or drilled/tem tested

NAMES OF FORMATIONS	TOP	BOTTOM
BARTLESVILLE	130	
	164	
	TD	

APPROVED _____ FOR COMMISSION USE ONLY

1) ITD Section

a) No Intent to Drill on file

1) Send warning letter

2) Recommend for contempt

2) Reject Codes

MSD

Were open hole logs run? yes X no NA AMENDED 1002A

Date Last log was run NA

Was CO₂ encountered? yes X no at what depths?

Was H₂S encountered? yes X no at what depths?

Were unusual drilling circumstances encountered? yes X no
If yes, briefly explain.

Other remarks

THIS LEASE HAS BEEN ACQUIRED BY WELL RENEWAL, INC. AMENDED 1002A IS BEING FILED FOR THE FOLLOWING REASON
A DILIGENT SEARCH WAS MADE OF OCC FILES. THERE IS NO COMPLETION REPORT ON FILE WITH OCC
CURRENT OPERATOR WANTS TO CONVERT THE WELL TO A DISPOSAL WELL. AN APPLICATION IS BEING
FILED WITH THE UIC DEPARTMENT

640 Acres

BOTTOM HOLE LOCATION

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

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (DRAINHOLES)

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

If more than two drainholes are proposed, attach a separate sheet indicating the necessary information.

Direction must be stated in degrees azimuth.

Please note, the horizontal drainhole and its end point must be located within the boundaries of the lease or spacing unit.

Directional surveys are required for all drainholes and directional wells.

DRAINHOLE #2

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