

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. 2008)

RECEIVED
SEP 29 2017
OKLAHOMA CORPORATION COMMISSION
KINGFISHER OFFICE

API NO.	35-025-35326
OTC PROD. UNIT NO.	
PLUGGING DATE	9/13/17
Well Name/No.	E. McGarraugh Unit #1
Location	C NW 1/4 SE 1/4
	Sec 26 Twp 2N Rge 9ECM
1980 Ft FSL of 1/4 Sec	660 Ft FWL of 1/4 Sec
County	Cimarron
Total Depth	4250'
Base of Treatable Water	470'
Well Classification	Gas

PLUGGING RECORD			
OAC 165-10-11-7			
E. McGarraugh Unit #1			
Location	C NW 1/4 SE 1/4	Sec 26	Twp 2N Rge 9ECM
1980 Ft FSL of 1/4 Sec	660 Ft FWL of 1/4 Sec	County Cimarron	
Total Depth	4250'	Base of Treatable Water	470'
Well Classification	Gas		

Locate Well on Grid

OPERATOR			
Name			OTC/OCC No.
M M Energy, Inc.			19118
Address			Phone
13927 Quail Pointe Dr.			() 405-463-3355
City		State	Zip
OKC		OK	73134-1035

Size	Run (ft)	Pulled (ft)	Conductor
8 5/8"	1640'	None	Surface
			I.C.
			I.C.
2 7/8"	3532'	1796'	P.C.
			Lnr.

Set 1 -	From 3296'	To 3304'
Set 2 -	From 3406'	To 3412'
Set 3 -	From	To
Set 4 -	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	2 7/8"	3243'	1/2 sk	0.12 bbls	3223'	
2	Cement	8 5/8"	1796'	80 sks	18.8 bbls	1501'	1536'
3	Cement	8 5/8"	534'	50 sks	11.75 bbls	349'	
4	Cement	8 5/8"	64'	20 sks	4.7 bbls	Surface	Surface
5							

REMARKS

Set 2 7/8" CIBP @ 3243' & cap 1/2 sk cement up to 3223'. Cut & pull 2 7/8" csg from 1796'. Circulate hole w/ 110 bbls mud & spot 80 sks Class "C" cement @ 1796'-1501'. WOC. Tag TOC @ 1536'. Spot 50 sks cement @ 534'-349'. Top out well 64'-4' w/ 20 sks cement.

Reason for Plugging
NON-COMMERCIAL

CEMENTER CERTIFICATION			
I certify that the cement plugs were placed in this well as shown on this report, per O.C.C. instructions. The cementing was performed by me or under my direct supervision. I certify all cementing data is true, correct and complete.			
Signature	Date	Name and Title Typed or Printed	
	9/14/17	Jason Orr - Manager	
Company Name	Address		Permit No.
Orr Enterprises, Inc.	P.O. Box 1706		825
City	State	Phone	Zip
Duncan	Oklahoma	580-251-9618	73534-1706

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	Name and Title Typed or Printed	
	9/15/17	LINDA CLOUD - Manager	

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.

Field Inspector