

NOTIFY DISTRICT OFFICE 24 HOURS PRIOR TO CEMENTING SURFACE CASING.

26.2. PIT INFORMATION:

A. TYPE OF MUD SYSTEM: WATER BASED OIL BASED GAS BASED (AIR DRILL)
 B. EXPECTED MUD CHLORIDE CONTENT: maximum: _____ ppm; average: _____ ppm.
 C. TYPE OF PIT SYSTEM: on-site off-site closed If off-site, specify location: _____
 D. IS DEPTH TO TOP OF GROUND WATER GREATER THAN 10 FT BELOW BASE OF PIT? Y N
 E. WITHIN 1 MILE OF MUNICIPAL WATER WELL? Y N
 F. WELLHEAD PROTECTION AREA? Y N Off-Site Pit No. _____

26.2 OCC USE ONLY A. CATEGORY 1A 1B 2 3 4 C Fm: _____

B. PIT LOCATION: Alluvial Plain Terrace Deposit Bedrock Aquifer Other H.S.A. Non-H.S.A.

C. Special area or field rule? _____ D. DEEP SCA? Y N E. CBL? Y N
 F. SOIL COMPACTED LINER REQUIRED? Y N G. 20 mil GEOMEMBRANE LINER REQUIRED Y N

29 Bottom Hole Location SEC _____ TWP _____ RGE _____ COUNTY _____

SPOT LOCATION: _____ FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: _____

Measured Total _____ True Vertical _____ BHL from nearest Lease, Unit, Or Property Line:
 Depth _____ Depth _____

30. Bottom Hole Location for Horizontal Hole: (LATERALS)

LATERAL #1: SEC _____ TWP _____ RGE _____ COUNTY _____

SPOT LOCATION: _____ FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: _____

Depth of Deviation _____ Radius of Turn _____ Direction _____ Total Length _____

Measured Total _____ True Vertical _____ End Point location from nearest lease, unit
 Depth _____ Depth _____ or property line: _____

LATERAL #2: SEC _____ TWP _____ RGE _____ COUNTY _____

SPOT LOCATION: _____ FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: _____

Depth of Deviation _____ Radius of Turn _____ Direction _____ Total Length _____

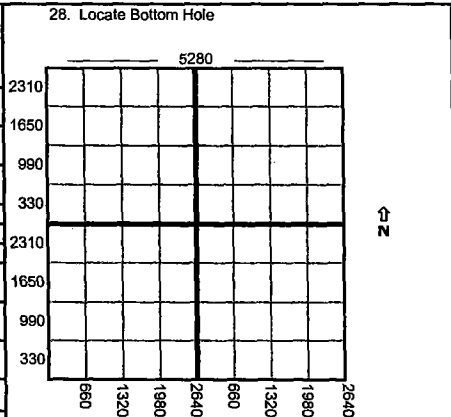
Measured Total _____ True Vertical _____ End Point location from nearest lease, unit
 Depth _____ Depth _____ or property line: _____

LATERAL #3: SEC _____ TWP _____ RGE _____ COUNTY _____

SPOT LOCATION: _____ FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: _____

Depth of Deviation _____ Radius of Turn _____ Direction _____ Total Length _____

Measured Total _____ True Vertical _____ End Point location from nearest lease, unit
 Depth _____ Depth _____ or property line: _____



1. If more than two drainholes are proposed, attach separate sheet indicating the necessary information.
2. Direction must be stated in degrees azimuth.
3. Please note the horizontal drainhole and its end point must be located within the legal boundaries of the lease or spacing unit. Directional surveys are required for all drainholes and directional wells.

31. AFFIDAVIT FOR ALTERNATIVE CASING PROGRAM (Signature on front of this form attests to this affidavit)

1. This well WILL WILL NOT penetrate any known lost circulation zones.
2. During the drilling of this well, withdrawals from any water well within 1/4 mile WILL WILL NOT exceed 50 gallons per minute.
3. The projected depth of the well IS IS NOT less than 100 feet from the top of any enhanced recovery project or gas storage facility.
4. List the following for all water wells within 1/4 mile of this well. (Information concerning some water wells may be obtained from the OKLAHOMA WATER RESOURCES BOARD, 3800 N. Classen Blvd., Oklahoma City, OK 73118). IF NO WATER WELLS FOUND, SO STATE. (ATTACH ADDITIONAL SHEET IF NECESSARY)

Name of Owner/Operator	Address of Owner/Operator	Location (Nearest 1/4 1/4 1/4 1/4)	Depth of Well

5. A cement bond log is required to be run and submitted from not less than 100 feet below the base of the treatable water-bearing formation to the surface. **OCC USE ONLY**
 6. If casing depth is more than 250 feet deeper than base of the treatable water-bearing formation, operator must submit a letter of request listing reasons and precautions to be taken.

INTENT TO DRILL CHECKLIST

APPROVED LC REJECTED _____

OCC USE ONLY 1. SURETY 6-10-2018
 A. NONE filed.
 B. EXPIRED: Date _____
 C. OUTSTANDING CONTEMPT ORDER.

OCC USE ONLY 4. GEOLOGY _____

DO NOT WRITE INSIDE THIS BOX

Date: 05/09/2018
 Case: 00010000
 Cashier: CRS
 Payor: GLB EXPLORATION, INC.
 Check: 068051
 \$175.00
 46 Intent to Drill
 RECEIPT 181136007
 OKLA CORP COM
 Time: 09:31

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.: 35065202650001

Completion Report

Spud Date: August 12, 2012

OTC Prod. Unit No.: 065-208957

Drilling Finished Date: September 26, 2012

1st Prod Date: October 26, 2012

Completion Date: December 20, 2012

Drill Type: HORIZONTAL HOLE

Well Name: EDDIE 2-31H

Purchaser/Measurer:

Location: JACKSON 6 2S 23W
 C N2 NW NE
 2310 FSL 660 FWL of 1/4 SEC
 Derrick Elevation: 1434 Ground Elevation: 1410

First Sales Date:

Operator: GLB EXPLORATION INC 18634

7716 MELROSE LN
 OKLAHOMA CITY, OK 73127-6002

Completion Type		Location Exception		Increased Density	
X	Single Zone	Order No		Order No	
	Multiple Zone	600892		599962	
	Commingled				

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
CONDUCTOR	16	32	J-55	72		26	SURFACE
SURFACE	9 5/8	36	J-55	1012	800	400	SURFACE
INTERMEDIATE	7	26	L-80 / N-80	7760	1000	175	6400
PRODUCTION	4 1/2	13.5	P-110	11200	2500	450	6600

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

Total Depth: 11208

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
Dec 20, 2012	ATOKA	107	50	98	916	120	PUMPING	450		

Completion and Test Data by Producing Formation

Formation Name: ATOKA		Code: 403ATOK		Class: OIL	
Spacing Orders			Perforated Intervals		
Order No	Unit Size		From	To	
575170	640		7770	10787	
Acid Volumes			Fracture Treatments		
426 BARRELS 15% HCL			24,007 BARRELS 40 POUNDS XL GEL + 1,278,950 POUNDS 20/40 PRC SAND		

Formation	Top
ATOKA	7326
MORROW	7353
CHESTER	7530

Were open hole logs run? Yes

Date last log run: August 24, 2012

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks
OCC: WE DO NOT HAVE FILE ORDER SO WE HAVE ACCEPTED OPERATORS DATA AS SUBMITTED.

Lateral Holes

Sec: 31 TWP: 1S RGE: 23W County: JACKSON
NE NW SW NE
1187 FSL 649 FWL of 1/4 SEC
Depth of Deviation: 6615 Radius of Turn: 986 Direction: 0 Total Length: 3164
Measured Total Depth: 11208 True Vertical Depth: 7341 End Pt. Location From Release, Unit or Property Line: 1453

FOR COMMISSION USE ONLY	
Status: Accepted	1117584

RECEIVED

DEC 27 2012

Form 1002A Rev. 2009

OKLAHOMA CORPORATION COMMISSION

API NO. 065-2025X
OTC PROD. UNIT NO. 065-208957

PLEASE TYPE OR USE BLOCK NOTE:

Attach copy of original if recompletion or r

AS SUBMITTED

ORIGINAL AMENDED (Reason)

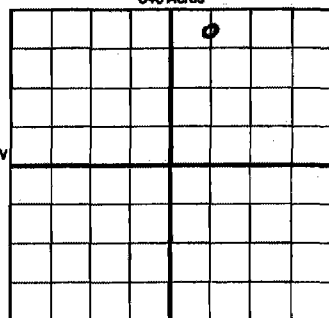
TYPE OF DRILLING OPERATION

STRAIGHT HOLE DIRECTIONAL HOLE HORIZONTAL HOLE
 SERVICE WELL

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

COUNTY JACKSON SEC 6 TWP 25 RGE 23W
LEASE NAME EDDIE WELL NO. 2-31H
DATE OF WELL COMPLETION 12/20/12
1st PROD DATE 10/26/12
RECOMP DATE
ELEVATIO N Derrick 1424 Ground 1410
FSL OF 1/4 SEC 2310 FWL OF 1/4 SEC 660
Longitude (if known)
OPERATOR NAME GLB EXPLORATION, INC OTC/OCC OPERATOR NO. 18634-0
ADDRESS 7716 MELROSE LN.
CITY OKC STATE OK ZIP 73127

640 Acres



LOCATE WELL

COMPLETION TYPE

SINGLE ZONE
 MULTIPLE ZONE
Application Date
 COMMINGLED
Application Date
LOCATION EXCEPTION ORDER 600892
INCREASED DENSITY ORDER NO. 599962

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR	16	32	J-55	72	-	26 YDS	SURFACE
SURFACE	9 5/8	36	J-55	1019	800	400	SURFACE
INTERMEDIATE	7	26	L-80 H-80	7760	1000	175	6400 est
PRODUCTION	4 1/2	13.5	P-110	11,200	2500	450	6600 est
LINER							

TOTAL DEPTH 11,208

PACKER @ BRAND & TYPE PLUG @ TYPE PLUG @ TYPE
PACKER @ BRAND & TYPE PLUG @ TYPE PLUG @ TYPE

COMPLETION & TEST DATA BY PRODUCING FORMATION

403 ATOK

FORMATION	SPACING & SPACING ORDER NUMBER	CLASS: Oil, Gas, Dry, Int, Disp, Comm Disp, Svc	PERFORATED INTERVALS	ACID VOLUME	FRACTURE TREATMENT (Fluids/Prop Amounts)
Atoka	640-575170	oil	10,787-7770	426 80 1/2 15% HCL	24,007 80 1/2 40% HCL GEL + 1,278, 950# 20/40 PRC SAND

Min Gas Allowable (165:10-17-7)

Gas Purchaser/Measurer

OR

First Sales Date

INITIAL TEST DATA

Oil Allowable (165:10-13-3)

INITIAL TEST DATE	12/20/12
OIL-BBL/DAY	107
OIL-GRAVITY (API)	50
GAS-MCF/DAY	98
GAS-OIL RATIO CU FT/BBL	916:1
WATER-BBL/DAY	120 BLW
PUMPING OR FLOWING	PUMPING
INITIAL SHUT-IN PRESSURE	450
CHOKE SIZE	
FLOW TUBING PRESSURE	

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

Signature: Glenn Blumstein
DATE: 12/26/12 PHONE NUMBER: 405-787-0049
ADDRESS: 7716 MELROSE LN. CITY: OKC STATE: OK ZIP: 73127 EMAIL ADDRESS: glbexplorationinc@flash.net

PLEASE TYPE OR USE BLACK INK ONLY

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

LEASE NAME EDDIE WELL NO. 2-31H

NAMES OF FORMATIONS	TOP
<i>Atoka</i>	7326
<i>MORROW</i>	7353
<i>Chester</i>	7530

FOR COMMISSION USE ONLY

ITD on file YES NO

APPROVED DISAPPROVED

2) Reject Codes _____

Were open hole logs run? yes no VERTICAL ONLY

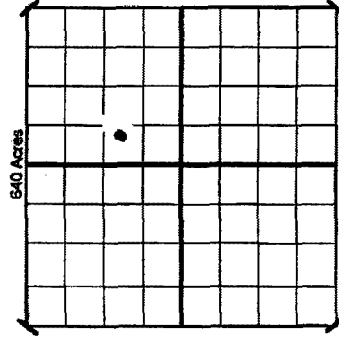
Date Last log was run 8/24/12

Was CO₂ encountered? yes no at what depths? _____

Was H₂S encountered? yes no at what depths? _____

Were unusual drilling circumstances encountered? yes no
If yes, briefly explain below _____

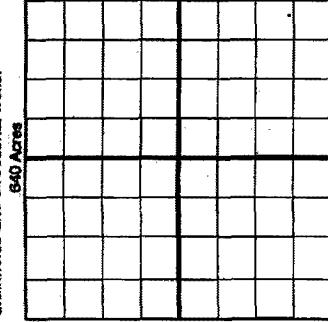
Other remarks: _____



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

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

Directional surveys are required for all drainholes and directional wells.



BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

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

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)

LATERAL #1	SEC	TWP	RGE	COUNTY	Feet From 1/4 Sec Lines	FSL	FWL
Spot Location <u>NE</u>	<u>21</u>	<u>15</u>	<u>234</u>	<u>JACKSON</u>	<u>NE</u>	<u>187</u>	<u>649</u>
Depth of Deviation	1/4	1/4	1/4	1/4	Direction	Total Length	
Measured Total Depth					<u>NORTH</u>	<u>3164</u>	
					BHL From Lease, Unit, or Property Line:		
					<u>7340</u>	<u>649</u>	

LATERAL #2	SEC	TWP	RGE	COUNTY	Feet From 1/4 Sec Lines	FSL	FWL
Spot Location 1/4	1/4	1/4	1/4	1/4	BHL From Lease, Unit, or Property Line:		
Depth of Deviation					Direction	Total Length	
Measured Total Depth					True Vertical Depth		

LATERAL #3	SEC	TWP	RGE	COUNTY	Feet From 1/4 Sec Lines	FSL	FWL
Spot Location 1/4	1/4	1/4	1/4	1/4	BHL From Lease, Unit, or Property Line:		
Depth of Deviation					Direction	Total Length	
Measured Total Depth					True Vertical Depth		