

1002A-465
Completed 5.31.17 JW

OKLAHOMA CORPORATION COMMISSION
TO SEND THIS FORM TO THE OCC,
PLEASE USE THE APPROPRIATE DISTRICT
OFFICE ADDRESS (ON THE BACK OF THIS

Form 1003/1003C
Rev. 2017

TYPE OR USE BLACK INK *01530*

API NO. 35-033-1530
OTC PROD. UNIT NC
PLUGGING DATE 07/09/18

PLUGGING RECORD
OAC 165-10-11-7
(PLEASE SEE INSTRUCTIONS ON BACK PAGE)

Well Name/No. WCCU Branch #2
Location NE 1/4 SE 1/4 SE 1/4 NW 1/4 Sec 18 Twp 3S Rge 11W
495 Ft FSL of 1/4 Sec 2475 Ft FWL of 1/4 Sec County Cotton
Total Depth 1538' Base of Treatable Water 50' Well Classification Inj

OPERATOR
Name Lewis Oil Properties, LLC OTC/OCC No. 13189
Address P.O. Box 220 Phone 580-856-3435
City Ratliff City State OK Zip Code 73481 Email Addr. dalelovelyengineering@yahoo.com

Size	Run (ft)	Pulled (ft)	Conductor
10 3/4"	42'	None	Surface
			I.C.
			I.C.
5 1/2"	1537'	None	P.C.
			Lnr.

PERFORATION DEPTHS		
Set 1 -	From 1537'	To 1542'
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	Cement	5 1/2"	1500'	40 sks	9.4 bbls	1105'	1146'
2	Cement	5 1/2"	142'	75 sks	17.6 bbls	Surface	Surface
3							
4							
5							

REMARKS
TIH w/ tbg & spot 40 sks Class "C" cement @ 1500'-1105'. WOC. Tag TOC @ 1146'. Circulate hole w/ 30 bbls mud & test 5 1/2" csg to 500 psi.
Test good. Perf 5 1/2" csg @ 142' & circulate to surface w/ 75 sks cement.
Reason for Plugging

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 *[Signature]* Date 7/10/18 Name and Title Typed or Printed Jason Orr - Plugging Agent
Company Name Orr Enterprises, Inc. Permit No. 825
Address P.O. Box 1706 Phone 580-251-9618
City Duncan State OK Zip 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 *[Signature]* Date 7/29/18 Name and Title Typed or Printed Dale Lovely, Petro Engr

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 *[Signature]* Field Inspector Michael Rightmire

RECEIVED

JUL 20 2018