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

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AUG 13 2018
OKLAHOMA CORPORATION COMMISSION
KINGFISHER OFFICE

TYPE OR USE BLACK INK

PLUGGING RECORD

OAC 165:10-11-7

(PLEASE SEE INSTRUCTIONS ON BACK PAGE)

API NO.	35-003-22348
OTC PROD. UNIT NO	003-208881
PLUGGING DATE	08/02/18

Well Name/No.	Farney 29-28-11 #1H				
Location	N2 1/4 N2 1/4 NW 1/4 NW 1/4	Sec 29	Twp 28N	Rge 11W	
275FNL	Ft FSL of 1/4 Sec 660	Ft FWL of 1/4 Sec	County	Alfalfa	
Total Depth 9907'	Base of Treatable Water 280'		Well Classification	Oil	

Locate Well on Grid

OPERATOR

Name	BCE-Mach LLC	OTC/OCC No.	24174
Address	14201 Wireless Way, Suite 300	Phone	405-252-2512
City OKC	State OK	Zip Code 73134	Email Addr. rhughes@machresources.com

PIPE RECORD

Size	Run (ft)	Pulled (ft)	
			Conductor
13 3/8"	665'	None	Surface
9 5/8"	1502'	None	I.C.
			I.C.
7"	5292'	1920'	P.C.
4 1/2"	4551'-9907'	None	Lnr.

PERFORATION DEPTHS

Set 1 -	From	5275'	To	9661'
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	7"	4500'	20 sks	4.7 bbls	4377'	
2	Cement	8 3/4"	1920'	40 sks	9.4 bbls	1794'	
3	Cement	9 5/8"	1602'	100 sks	23.5 bbls	1298'	1386'
4	Cement	9 5/8"	715'	45 sks	10.6 bbls	578'	
5	Cement	9 5/8"	330'	45 sks	10.6 bbls	193'	64'-4' w/ 20 sks

REMARKS

Set 7" CIBP @ 4500' & cap w/ 20 sks Class "C" cement up to 4377'. Cut & pull 7" csg from 1920' (43 jts). Spot 40 sks cement @ 1920'-1794'. Spot 100 sks cement @ 1602'-1298'. WOC. Tag TOC @ 1386'. Spot 45 sks cement @ 715'-578'. Spot 45 sks cement @ 330'-193'. POH w/ tbg & top out well 64'-4' w/ 20 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	Date 8/7/18	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 ture, correct, and complete to the best of my knowledge. This covers all well data and information presented herein.

Signature	Date 8/8/18	Name and Title Typed or Printed Tyler Houle Senior Completion/Production Engineer

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