1002A-YES
Completed
8.15.92

11-12-13

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. 2011

PLUGGING RECORD
OAC 165:10-11-7

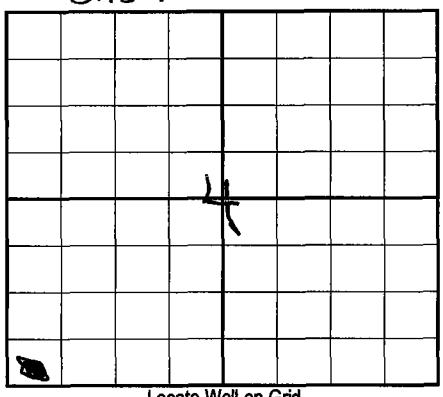
API NO. 141-20315
OTC PROD. UNIT NO.
PLUGGING DATE 9-11-13

Well Name/No. Hudgins-Reid #1

Location SW 1/4 SW 1/4 SE 1/4 ___ 1/4 | Sec 4 | Twp 5S | Rge 14W

Ft FSL of 1/4 Sec | Ft FWL of 1/4 Sec | County Tillman

Total Depth 1793' | Base of Treatable Water 250' | Well Classification OIL



Locate Well on Grid

OPERATOR

Name Helton Oil Company | OTC/OCC No. 15136
Address PO Box 7283 | Phone 405 615-5500
City EDMOND | State OK | Zip 73083

PIPE RECORD

Size	Run (ft)	Pulled (ft)	
8 5/8	82	0	Surface
			I.C.
			I.C.
4.5"	1786'	0	P.C.
			Lnr.

PERFORATION DEPTHS

Set 1 - From 1624 To 30
Set 2- From To
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	Cement	4 1/2"	1315'	30	39.6	1215'	
2	Cement	4 1/2"	240'	75	99	3'	
3	CIBP	4 1/2"	1500'	2	1	0	1490
4							
5							

RECEIVED
OKLAHOMA CORPORATION COMMISSION
NOV 06 2013
DISTRICT III
DUNCAN

REMARKS

NOT COMMERCIAL
Reason for Plugging

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 Kaylee Robey | Date 9-11-13 | Name and Title Typed or Printed Kaylee Robey, Representative

Company Name Basic Energy Services | Permit No. 849
Address PO Box 712 | Phone 940-495-3898
City Electra | State TX | Zip 76360

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 John R Helton | Date 11-6-13 | Name and Title Typed or Printed JOHN R. HELTON, OWNER

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 R. D. Ramirez

INSTRUCTIONS