

APPLICATION TO DRILL, RECOMPLETE OR REENTER

FORM 1000
REV 1996

FILE ORIGINAL ONLY
PLEASE TYPE OR USE BLACK INK

OKLAHOMA CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
JIM THORPE BUILDING
P.O. BOX 52000-2000
OKLAHOMA CITY, OK 73152-2000
(RULE 165:10-3-1)

BATCH NUMBER (OCC USE ONLY)

1. OTC/OCC OPERATOR NUMBER
07910-0

2. API NUMBER
087-21905

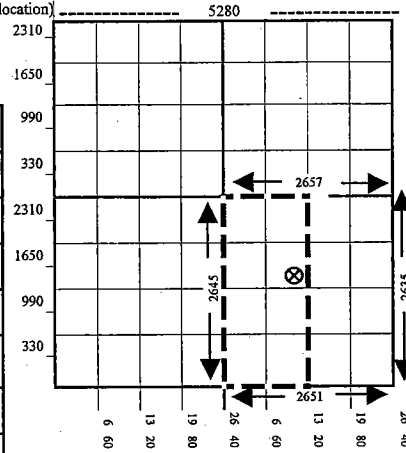
3. NOTICE OF INTENT TO: (CHECK ONLY ONE)
DRILL RECOMPLETE REENTER DEEPEN AMEND - REASON _____

6. LOCATE WELL AND OUTLINE
LEASE OR SPACING UNIT IN INK

4. TYPE OF DRILLING OPERATION >>>>> NOTE: If directional or horizontal, see reverse side for bottom hole location)

A. STRAIGHT HOLE DIRECTIONAL HOLE HORIZONTAL HOLE

B. OIL/GAS INJECTION DISPOSAL WATER SUPPLY



5. WELL LOCATION:

SECTION 20	TOWNSHIP 7N	RANGE 3W	COUNTY McCLAIN
SPOT LOCATION: SE/4 NW/4 SE/4			FEET FROM QUARTER from SOUTH LINE from WEST LINE SECTION LINES: 1400 1054

7. Well will be **273** feet from nearest unit or property boundary.

8. LEASE NAME: **BRODY** WELL NUMBER: **#1-20**

9. NAME OF OPERATOR:
OKLAND OIL COMPANY

ADDRESS: **110 N. ROBINSON SUITE #400** PHONE (AC/NUMBER): **405.236.3046**

CITY: **OKLAHOMA CITY** STATE: **OK** ZIP CODE: **73102**

10. SURFACE OWNER (one only, attach sheet for additional owners)
CD & BS, LLC

ADDRESS: **603 TERRACE PLACE**

CITY: **NORMAN** STATE: **OK** ZIP CODE: **73069**

11. Is well located on lands under federal jurisdiction?
 Y N

12. Will a water well be drilled? Y N
Will surface water be used? Y N

13. DATE OPERATION TO BEGIN:
ASAP

14. LIST TARGET FORMATIONS AND DEPTHS OF EACH BELOW (LIMITED TO TEN)

1) HART SAND	8830	6)
2) OSBORNE SAND	9150	7)
3) HUNTON	9900	8)
4) VIOLA LIME	10450	9)
5) BROMIDE SAND	10900	10)

15. SPACING ORDER NUMBER(S) AND SIZE UNIT(S):
121652 - 80 ACRES

16. PENDING APPLICATION C.D. NO. _____ 17. LOCATION EXCEPTION ORDER NO. **590517** 18. INCREASED DENSITY ORDER NO. _____

19. TOTAL DEPTH **11000** 20. GROUND ELEV. **1195** 21. DEPTH TO BASE OF TRE **140** 22. SURFACE CASING SET 23. ALT CASING PROC. USED? **N**

OCC USE ONLY

24. ALTERNATIVE CASING PROCEDURE, check box and fill in blank (AFFIDAVIT REQUIRED, see reverse side, line 31.)
N/A A. Cement will be circulated from total depth to ground surface on the production casing string.
N/A B. Cement will be circulated from _____ depth to _____ depth by use of a two stage cementing to _____

25.1. PIT INFORMATION: Using more than one pit or mud system? Y X N If yes, fill out line 25.2 on top reverse side.

A. Type of mud system: WATER BASE OIL BASED GAS BASED (AIR DRILL)

B. Expected mud chloride content: maximum: **5000** ppm; average: **2500** 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 X N OFFSITE PIT #: _____

F. Wellhead Protection Area Y X N

26.1. OCC USE ONLY

A. Category 1A 1B 2 3 4

B. Pit Location: Alluvial Plain/Terrace Deposit Bedrock Aquifer Other HSA Non-HSA ; Fm _____

C. Special area or field rule? _____ D. DEEP SCA? Y N Yield > 50 _____ E. CBL required? Y N.

F. SOIL or GEOMEMBRANE LINER REQUIRED? Y N; GEOMEMBRANE LINER REQUIRED? Y N 20 mil 30 mil

27. PROPOSED METHOD FOR DISPOSAL OF DRILLING FLUIDS (MUST BE COMPLETED)

- A. Evaporation/ dewater and backfilling of reserve pit.
- B. Solidification of pit contents.
- C. Annular Injection ----- (REQUIRES PERMIT and surface casing set 200 feet below base of treatable water-bearing formation.)
- D. One time land application --- (REQUIRES PERMIT) PERMIT # _____
- E. Haul to Commercial pit facility; Specify site: _____
- F. Haul to Commercial soil farming facility; Specify site: _____
- G. Haul to recycling/re-use facility; Specify site: _____
- H. Other; Specify: **HAUL TO DISPOSAL**

I hereby certify I am authorized to submit this two page application prepared by me or under my supervision.
The facts and proposals made herein are true, correct and complete to the best of my knowledge and belief.

SIGNATURE: NAME(Print or Type) **MARK WELLS** PHONE(AC/NUMBER) **405.236.3046** DATE **4/8/2014**

NOTICE: Approval is void if operations have not commenced within six months of the date of approval. An approved permit must be posted at the location during drilling and completion operations.
File the Form 1001A, Spud Report, within fourteen days of commencement of oper

SECTION 20
TOWNSHIP 7N
RANGE 3W
WELL NAME BRODY #1-20

25.2. PIT INFORMATION - PIT #2.

PIT # 2

A. Type of mud system: WATER BASE 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 OFFSITE PIT #

F. Wellhead Protection Area Y N

26.2. OCC USE ONLY

A. Category: 1A 1B 2 3 4 Fm

B. Pit Location: Alluvial Plain/Terrace Deposit Bedrock Aquifer Other HSA Non-HSA

C. Special area or field rule? Deep SEA? Y N Yield: 50

E. SOIL or GEOMEMBRANE LINER REQUIRED? Y N GEOMEMBRANE LINER REQUIRED? Y 20 mil 30 mil

29. Bottom Hole Location for Directional Hole:

SEC TWP RGE COUNTY

SPOT LOCATION: 1/4 SEC 1/4 1/4 SECTION LINES: FEET FROM QUARTER from SOUTH LINE from WEST LINE

Measured Total Depth True Vertical Depth BHL from Lease, Unit, or Property Line:

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

DRAIN HOLE #1: SEC TWP RGE COUNTY

SPOT LOCATION: 1/4 1/4 1/4 1/4 SECTION LINES: FEET FROM QUARTER from SOUTH LINE from WEST LINE

Depth of Deviation Radius of turn Direction Total Length

Measured Total Depth True Vertical Depth End point location from lease, unit or property line:

DRAIN HOLE #2: SEC TWP RGE COUNTY

SPOT LOCATION: 1/4 1/4 1/4 1/4 SECTION LINES: FEET FROM QUARTER from SOUTH LINE from WEST LINE

Depth of Deviation Radius of turn Direction Total Length

Measured Total Depth True Vertical Depth End point location from lease, unit or property line:

31. AFFIDAVIT FOR ALTERNATIVE CASING PROGRAM

(signature on front of this form attests to this affidavit)

1. This well WILL X 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 X WILL NOT) exceed 50 gallons per minute.

3. 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, P.O. Box 150, Oklahoma City, OK 73101- 0150). If no water wells are found, so state: (ATTACH ADDITIONAL SHEET IF NECESSARY)

Name of Owner/Operator Address of Owner/Operator Location (Nearest 1/4 1/4 1/4) Deepest producing interval

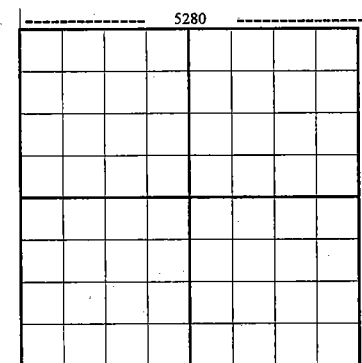
4. The projected depth of the well IS X IS NOT less than 100 feet from the top of any enhanced recovery project or gas storage facility.

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.

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	OCC USE ONLY	OCC USE ONLY	OCC USE ONLY
APPROVED	REJECTED		
<p>1. SURETY</p> <p>A. NONE filed. <u>2/1/15</u></p> <p>B. EXPIRED: Date <u> </u></p> <p>C. OUTSTANDING COMTEMPT ORDER. <u> </u></p>			
<p>4. GEOLOGY</p> <p>A. SURFACE CASING</p> <p>1. Insufficient amount, Requires <u> </u> feet.</p> <p>2. Insufficient Alternate Casing Program <u> </u></p> <p>3. No Affidavit Submitted for Alternative Casing Program. <u> </u></p> <p>4. Reentry requires <u> </u> feet, only <u> </u> current.</p> <p>B. UNSPACED: Less than 2500 ft (165°) More than 2500 ft. (330°)</p> <p>Only <u> </u> ft from N/S and <u> </u> ft from E/W line.</p> <p>C. SPACED: SPACING ORDER No. <u> </u></p> <p>1. Square Pattern: 2.5, 10, 40, 160, 640</p> <p>NW/SE or NE/SW</p> <p>2. Rectangular pattern: 5, 20, 80, 320</p> <p>3. Rectangular slot pattern: 5, 20, 80, 320</p> <p>Prior to 1971 (Y, N) SU/LD</p> <p>D. LOCATION EXCEPTION:</p> <p>1. Surface Hole Location different <u> </u></p> <p>2. Bottom Hole Location different <u> </u></p> <p>E. PENDING APPLICATION: Spacing/Location Exception</p> <p>C.D. No.: <u> </u></p> <p>H.O.M. DATE: <u> </u></p> <p>F. OPERATOR NAME DIFFERENT in order No. <u> </u></p> <p>Name on order: <u> </u></p> <p>Location Exception/Increased Density/Pooling</p> <p>G. Increased Density/Location Exception EXPIRED</p> <p>Order Expired: Date: <u> </u></p> <p>H. Outline Lease or Property Boundary <u> </u></p>			

DO NOT WRITE INSIDE THIS BOX



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.

Check# 0782765 46 Intent to Drill

Case# 000000000 Cashier: JRT

Date: 04/09/2014 Time: 10:32

Payor: OKLAND OIL COMPANY \$175.00

RECEIPT 1407280020

OKLA CORP COM

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.: 35087219050000

Completion Report

Spud Date: February 11, 2012

OTC Prod. Unit No.:

Drilling Finished Date: March 10, 2012

1st Prod Date: April 24, 2012

Completion Date: April 05, 2012

Drill Type: STRAIGHT HOLE

Well Name: BRODY 1-20

Purchaser/Measurer:

Location: MCCLAIN 20 7N 3W
SE SE NW SE
1400 FSL 1054 FWL of 1/4 SEC
Derrick Elevation: 1210 Ground Elevation: 1195

First Sales Date:

Operator: OKLAND OIL COMPANY 7910

110 N ROBINSON AV STE 400
OKLAHOMA CITY, OK 73102-9022

Completion Type	
X	Single Zone
	Multiple Zone
	Commingled

Location Exception
Order No
590517

Increased Density
Order No
There are no Increased Density records to display.

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
CONDUCTOR	20	94	H-40	60		5	SURFACE
SURFACE	8 5/8	24	J-55	500	500	320	SURFACE
PRODUCTION	4 1/2	11.6	N-80 / P-110	11016	3000	643	8200

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

Total Depth: 11035

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
Apr 25, 2012	BROMIDE	175	44				FLOWING	750	14/64	460

Completion and Test Data by Producing Formation

Formation Name: BROMIDE

Code: 202BRMD

Class: OIL

Spacing Orders

Order No	Unit Size
121652	80

Perforated Intervals

From	To
10936	10946

Acid Volumes

There are no Acid Volume records to display.
--

Fracture Treatments

There are no Fracture Treatments records to display.
--

Formation	Top
HART SAND	9050
OSBORN SAND	9196
HUNTON	9910
VIOLA LIME	10484
BROMIDE SAND	10936

Were open hole logs run? Yes

Date last log run: March 08, 2012

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks

There are no Other Remarks.

FOR COMMISSION USE ONLY

1114510

Status: Accepted

API NO. 087-21905
 OTC PROD. UNIT NO.

PLEASE TYPE OR USE BLACK INK ON!
 NOTE:
 Attach copy of original 1002A if recompleted

AS SUBMITTED

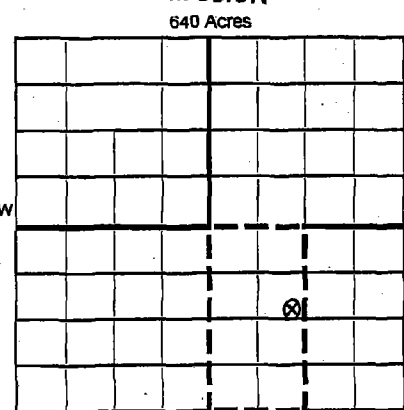
Form 1002A
 Rev. 2007

RECEIVED
 APR 30 2012
 OKLAHOMA CORPORATION
 COMMISSION

X ORIGINAL
 ___ AMENDED
 Reason Amended _____
 TYPE OF DRILLING OPERATION
 X STRAIGHT HOLE ___ DIRECTIONAL HOLE ___ HORIZONTAL HOLE
 ___ SERVICE WELL

COMPLETION REPORT

If directional or horizontal, see reverse for bottom hole location.
 COUNTY **McCLAIN** SEC **20** TWP **7N** RGE **3W** SPUD DATE **2/11/2012**
 LEASE NAME **BRODY** WELL NO. **#1-20** DRLG FINISHED **3/10/2012**
 SHL **SE 1/4 SE 1/4 NW 1/4 SE 1/4** FSL **1400** FWL OF 1/4 SEC **1054** WELL COMPLETION **4/5/2012**
 SE 1/4 SE 1/4 NW 1/4 SE 1/4
 ELEVATION **1210** Ground **1195** Latitude if Known **35°03'45.4"N** Longitude if Known **97°32'05.4"W**
 Derrick Fl
 OPERATOR NAME **OKLAND OIL COMPANY** OTC/OCC OPERATOR NO. **07910-0**
 ADDRESS **110 N. ROBINSON SUITE #400**
 CITY **OKLAHOMA CITY** STATE **OK** ZIP **73102**



COMPLETION TYPE
 X SINGLE ZONE
 MULTIPLE ZONE
 Application Date _____
 COMMINGLED
 Application Date _____
 LOCATION EXCEPTION ORDER NO.
591517
 INCREASED DENSITY ORDER NO.

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMI	
Conductor	20"	94#	H40	60'		5 YDS	0'	
Surface	8-5/8"	24#	J55	500'	500#	320	0'	
Intermediate								
Production	4-1/2"	11.6#	N80/P110	11016'	3000#	643	8200'	
							TOTAL DEPTH	11035'

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

COMPLETION & TEST DATA BY PRODUCING FORMATION

202 BRMD

FORMATION	SPACING & SPACING ORDER NUMBER	CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	PERFORATED INTERVALS	ACID/VOLUME Fracture Treatment (Fluids/Prop Amounts)
BROMIDE SAND	80 ACRES-121652	OIL	10136'-46' <i>10936'-10946'</i>	

Request minimum gas allowable (165-10-17-7) Gas Purchaser/Measurer _____ 1st Sales Date _____

INITIAL TEST DATA	INITIAL TEST DATE	OIL-BBL/DAY	OIL-GRAVITY (API)	GAS-MCF/DAY	GAS-OIL RATIO CU FT/BBL	WATER-BBL/DAY	PUMPING OR FLOWING	INITIAL SHUT-IN PRESSURE	CHOKE SIZE	FLOW TUBING PRESSURE
	4/25/2012	175.00	44	NIL	N/A	0	FLOW	750	14/64"	460

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 MARK WELLS NAME (PRINT OR TYPE)
 DATE 4/26/2012 PHONE NUMBER 405.236.3046
 ADDRESS 110 N. ROBINSON SUITE #400 OKLAHOMA CITY OK 73102
 CITY STATE ZIP EMAIL ADDRESS mwells@oklandoil.com

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 drillstem tested.

LEASE NAME BRODY

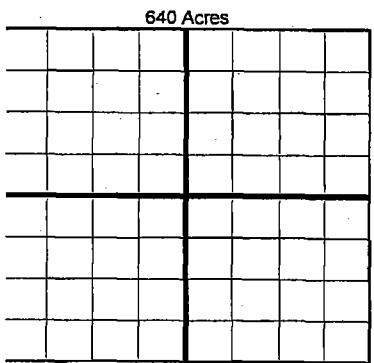
WELL NO. #1-20

NAMES OF FORMATIONS	TOP
HART SAND	9050
OSBORNE SAND	9196
HUNTON	9910
VIOLA LIME	10484
BROMIDE SAND	10936

FOR COMMISSION USE ONLY	
ITD on file	<input type="checkbox"/> YES <input type="checkbox"/> NO
APPROVED	DISAPPROVED
2) Reject Codes	

Were open hole logs run?	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
Date Last log was run	3/8/2012	
Was CO ₂ encountered?	yes <input checked="" type="checkbox"/>	no <input type="checkbox"/> at what depths?
Was H ₂ S encountered?	yes <input checked="" type="checkbox"/>	no <input type="checkbox"/> at what depths?
Were unusual drilling circumstances encountered?	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no
If yes, briefly explain.		

Other remarks:



BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

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

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)

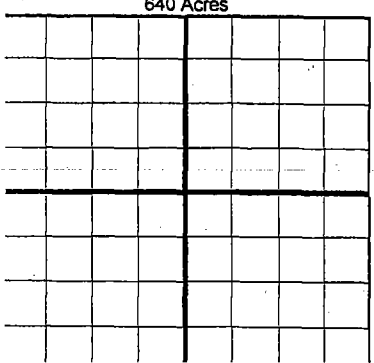
LATERAL #1

SEC	TWP	RGE	COUNTY				
Spot Location	1/4	1/4	1/4	1/4	Feet From 1/4 Sec Lines	FSL	FWL
Depth of Deviation	Radius of Turn		Direction	Total Length			
Measured Total Depth	True Vertical Depth		End Pt Location From Lease, Unit or Property Line:				

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 ease or spacing unit.

Directional surveys are required for all drainholes and directional wells.



LATERAL #2

SEC	TWP	RGE	COUNTY				
Spot Location	1/4	1/4	1/4	1/4	Feet From 1/4 Sec Lines	FSL	FWL
Depth of Deviation	Radius of Turn		Direction	Total Length			
Measured Total Depth	True Vertical Depth		End Pt Location From Lease, Unit or Property Line:				

LATERAL #3

SEC	TWP	RGE	COUNTY				
Spot Location	1/4	1/4	1/4	1/4	Feet From 1/4 Sec Lines	FSL	FWL
Depth of Deviation	Radius of Turn		Direction	Total Length			
Measured Total Depth	True Vertical Depth		End Pt Location From Lease, Unit or Property Line:				