

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

API NUMBER: 065 20249 A

Approval Date: 01/16/2015
Expiration Date: 07/16/2015

Horizontal Hole Oil & Gas

PERMIT TO RECOMPLETE

WELL LOCATION: Sec: 31 Twp: 1S Rge: 23W County: JACKSON
SPOT LOCATION: N2 N2 NE NE FEET FROM QUARTER: FROM SOUTH FROM WEST
SECTION LINES: 2465 1980

Lease Name: EDDIE Well No: 1-31H Well will be 175 feet from nearest unit or lease boundary.
Operator Name: GLB EXPLORATION INC Telephone: 4057870049 OTC/OCC Number: 18634 0

GLB EXPLORATION INC
7716 MELROSE LN
OKLAHOMA CITY, OK 73127-6002

EDDIE WAYNE MITCHELL
P.O. BOX 796
ALTUS OK 73521

Formation(s) (Permit Valid for Listed Formations Only):

Name	Depth	Name	Depth
1 CANYON	5000	6	
2		7	
3		8	
4		9	
5		10	

Spacing Orders: 575170 Location Exception Orders: Increased Density Orders: 626532
Pending CD Numbers: 201406585 Special Orders:

Total Depth: 9425 Ground Elevation: 1391 Surface Casing: 1020 IP Depth to base of Treatable Water-Bearing FM: 230

Under Federal Jurisdiction: No Fresh Water Supply Well Drilled: No Surface Water used to Drill: No

Approved Method for disposal of Drilling Fluids:

HORIZONTAL HOLE 1

Sec 31 Twp 1S Rge 23W County JACKSON

Spot Location of End Point: NE NW NE SE

Feet From: SOUTH 1/4 Section Line: 2629

Feet From: WEST 1/4 Section Line: 1933

Depth of Deviation: 7276

Radius of Turn: 10

Direction: 180

Total Length: 1530

Measured Total Depth: 9425

True Vertical Depth: 7312

End Point Location from Lease,
Unit, or Property Line: 707

This permit does not address the right of entry or settlement of surface damages.
The duration of this permit is SIX MONTHS, except as otherwise provided by Rule 165: 10-3-1.
Rule 165: 10-3-4 (c) (7) (e) - The Operator shall give 24 Hours notice by telephone to the appropriate District Office of the Conservation Division as to when Surface Casing will be run.

Notes:

Category	Description
FRAC FOCUS	1/16/2015 - G91 - THE REQUIREMENT FOR CHEMICAL DISCLOSURE OF HYDRAULIC FRACTURING INGREDIENTS WILL BE EXTENDED TO INCLUDE ALL NON-HORIZONTAL WELLS FOR HYDRAULIC FRACTURING OPERATIONS BEGINNING JANUARY 1, 2014. REFER TO OCC RULE 165:10-3-10 FOR COMPLIANCE REQUIREMENTS. PLEASE REPORT DIRECTLY TO FRACFOCUS USING THE FOLLOWING LINK HTTP://FRACFOCUS.ORG/ OR FOR OCC ASSISTANCE CONTACT DENNIS NISKERN AT 405-522-2977 OR D.NISKERN@OCCEMAIL.COM
INCREASED DENSITY - 626532	1/16/2015 - G91 - 31-1S-23W X575170 CNYN 4 WELLS GLB EXPLORATION, INC. 6-10-2014
PENDING CD - 201406585	1/16/2015 - G91 - (E.O.) 31-1S-23W X575170 CNYN SHL 175 FNL, 660 FEL POE NCT 150 FNL, NCT 600 FEL BHL NCT 150 FNL, NCT 600 FEL GLB EXPLORATION, INC. REC. 9-29-2014 (NORRIS)
SPACING - 575170	1/16/2015 - G91 - (640) 31-1S-23W VAC 203552/219498 CNYN, OTHERS EXT 570401 CNYN, OTHERS

00592

FORM 1000
REV. 2009

APPLICATION TO DRILL, RECOMPLETE OR REENTER

FILE ORIGINAL ONLY
PLEASE TYPE OR USE BLACK INK

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

BATCH NUMBER (OCC USE ONLY)

1. OTG/OCC OPERATOR NUMBER
18634-0
2. API NUMBER
065-20249

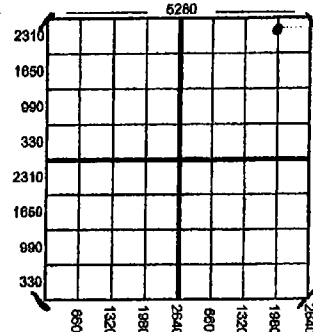
3. NOTICE OF INTENT TO: (CHECK ONLY ONE)
 DRILL RECOMPLETE REENTER DEEPEN AMEND - REASON

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 STRAT TEST SERVICE WELL

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

5. WELL LOCATION:

SECTION **31** TOWNSHIP **13** RANGE **23W** COUNTY **JACKSON**
SPOT LOCATION: **N1/2 1/4 | N1/2 1/4 | NE 1/4 | NE 1/4** FEET FROM QUARTER from SOUTH LINE from WEST LINE
SECTION LINES: **8465 1900**



7. Well will be **175** feet from nearest unit or property boundary.

8. LEASE NAME: **EDDIE 1-31H** WELL NUMBER:

9. NAME OF OPERATOR **GLB EXPLORATION, INC** EMAIL ADDRESS:

ADDRESS **7716 MELROSE LANE** PHONE (AC NUMBER) **405-787-0049**

CITY **OKLAHOMA CITY** STATE **OK** ZIP CODE **73127**

10. SURFACE OWNER (OCC USE ONLY. ATTACH SHEET FOR ADDITIONAL OWNERS)

EDDIE Wayne Mitchell

ADDRESS **PO BOX 796**

CITY **Altus OK** STATE **OK** ZIP CODE **73521**

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) **CANYON 5000**
- 2)
- 3)
- 4)
- 5)

TEMPORARY AUTHORIZATION TO DRILL

Expiration Date: **9-11-2014**

Signature: *Glenn Blumstein*

16. SPACING ORDER NUMBER(S) AND SIZE UNIT(S):

575170-640

18. PENDING APPLICATION C.D. NO. **20140205** 17. LOCATION EXCEPTION ORDER NO. **4-4-2011**

18. INCREASED DENSITY ORDER NO. **165-10-1-1**

19. TOTAL DEPTH **9425** 20. GROUND ELEV. **1391** 21. BASE OF TREATABLE WATER **290** 22. SURFACE CASING **1020 SET** 23. ALT CASING PROG USED? Y N

24. ALTERNATIVE CASING PROCEDURE, check box and fill in blank (AFFIDAVIT REQUIRED, see reverse side, line 31.)

A. Cement will be circulated from total depth to ground surface on the production casing string.
B. Cement will be circulated from _____ depth to _____ depth by use of a two stage cementing tool.
25.1. PIT INFORMATION: Using more than one pit or mud system? Y N If yes, fill out line 25.2 on top reverse side.
A. TYPE OF MUD SYSTEM: WATER BASED OIL BASED GAS BASED (AIR DRILL)
B. EXPECTED MUD CHLORIDE CONTENT: maximum: _____ ppm; average: _____ ppm.
PIT #1 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 Off-Site Pit No. _____
F. WELLHEAD PROTECTION AREA? Y N

26.1 OCC USE ONLY A. CATEGORY 1A 1B 2 3 4 C
B. PIT LOCATION: Alluvial Plain Terrace Deposit Badrock Aquifer Other H.S.A. Non-H.S.A. Frm: _____
C. Special area or field rule? Y N D. DEEP SCA? Y N E. CBL required? Y N
F. SOIL COMPACTED LINER REQUIRED? Y N G. 20 mil GEOMEMBRANE LINER REQUIRED? Y N

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.) PERMIT NO. _____
D. One time land application (REQUIRES PERMIT) PERMIT NO. _____
E. Haul to Commercial pit facility; Specify site: _____ Order No. _____
F. Haul to Commercial soil farming facility; Specify site: _____ Order No. _____
G. Haul to recycling/re-use facility; Specify site: _____ Order No. _____
H. Other, Specify: _____

31
13
23W
EDDIE
1-31H

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 *Glenn Blumstein* NAME (Print or Type) **GLENN BLUMSTEIN** PHONE (ACNO.) **405-787-0049** FAX **787-8889** DATE **8/21/14**

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 operations.

NOTIFY DISTRICT OFFICE 24 HOURS PRIOR TO CEMENTING SURFACE CASING.

25.2. 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 ml GEOMEMBRANE LINER REQUIRE Y N

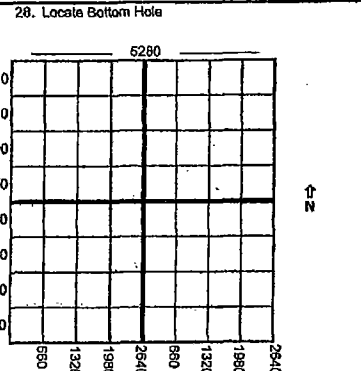
29 Bottom Hole Location SEC TWP RGE COUNTY
 for Directional Hole:
 SPOT LOCATION: 1/4 1/4 1/4 FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES:
 Measured Total Depth True Vertical Depth BHL from nearest Lease, Unit, Or Property Line:

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

LATERAL #1: SEC 31 TWP 15 RGE 2300 COUNTY JYKSON
 SPOT LOCATION: NE 1/4 NW 1/4 SE 1/4 FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: 2629 1933
 Depth of Deviation 7276 Radius of Turn 304 Direction 181 Total Length 1520
 Measured Total Depth 9425 True Vertical Depth 7312 End Point location from nearest lease, unit or property line: 7017

LATERAL #2: SEC TWP RGE COUNTY
 SPOT LOCATION: 1/4 1/4 1/4 FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES:
 Depth of Deviation Radius of Turn Direction Total Length
 Measured Total Depth True Vertical Depth End Point location from nearest lease, unit or property line:

LATERAL #3: SEC TWP RGE COUNTY
 SPOT LOCATION: 1/4 1/4 1/4 FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES:
 Depth of Deviation Radius of Turn Direction Total Length
 Measured Total Depth True Vertical Depth End Point location from nearest lease, unit 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 REJECTED OCC USE ONLY
 1. SURETY
 A. NONE filed. 10-10-15
 B. EXPIRED: Date
 C. OUTSTANDING CONTEMPT ORDER.
 4. GEOLOGY

DO NOT WRITE INSIDE THIS BOX

Case: 000000000
 Payor: SLR EXPLORATION, INC
 Check: 056223
 46 Intent to Drill
 RECEIPT 1501518019
 DATE: 08-25-2014 TIME: 12:04
 CASHIER: JRI
 1175.00