

1. API No.: 35121247170000
 2. OTC Prod. Unit No.: 23042
 3. Date of Application: August 11, 2015

4. Application For (check one)

A. Commingled Completion in the Wellbore (165:10-3-39)
 B. Commingled Completion at the Surface (165: 10-3-39)
 C. Multiple (Dual) Completion (165: 10-3-36)
 D. Downhole Multiple Choke Assembly (165: 10-3-37)

5. Operator Information

VANGUARD PERMIAN LLC OTC/OCC No. 23042

5847 SAN FELIPE ST STE 3000
 HOUSTON, TX 77057-3399

Phone 8323272255
 Fax 8323272260
 Email GOGGERO@VNRLLC.COM

6. Lease Name/Well No. HOEHNE RANCH 3-2H

7. Location within Sec. (1/4 1/4 1/4 1/4) NW SE SE SW **Sec.** 3 **Twp.** 7N **Rge.** 12E **County** PITTSBURG

8. The Following Facts are Submitted

Name of common source of supply	WOODFORD	Top and bottom of pay section (perforations)	5671 - 7790
Type of production (oil or gas)	Gas	Method of production (flowing or art. lift)	Flowing
Latest test data by zone (oil, gas, and water)	0 BO/d, 3547 mcf/d, 1188 BW/d	Wellhead or bottomhole pressure	

Spacing Order		Increased Density		Location Exception	
Order Number	Unit Size	Order Number	Unit Size	Order Number	Unit Size
613743	640	625170		633044	

Name of common source of supply	WOODFORD	Top and bottom of pay section (perforations)	8582 - 9789
Type of production (oil or gas)	Gas	Method of production (flowing or art. lift)	Flowing
Latest test data by zone (oil, gas, and water)	0 bbl/d, 85128 mcf/d, 1188 bbl/d	Wellhead or bottomhole pressure	

Spacing Order		Increased Density		Location Exception	
Order Number	Unit Size	Order Number	Unit Size	Order Number	Unit Size
613743	640				

Oklahoma Corporation Commission
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000
Rule 165: 10-3-25

Name of common source of supply	SYLVAN	Top and bottom of pay section (perforations)	7873 - 7948
Type of production (oil or gas)	Gas	Method of production (flowing or art. lift)	Flowing
Latest test data by zone (oil, gas, and water)	0 bbl/d, 85128 mcf/d, 1188 bbl/d	Wellhead or bottomhole pressure	

Spacing Order		Increased Density		Location Exception	
Order Number	Unit Size	Order Number	Unit Size	Order Number	Unit Size
626070	640	649063			

Name of common source of supply	SYLVAN	Top and bottom of pay section (perforations)	8285 - 8513
Type of production (oil or gas)	Gas	Method of production (flowing or art. lift)	Flowing
Latest test data by zone (oil, gas, and water)	0 bbl/d, 85128 mcf/d, 1188 bbl/d	Wellhead or bottomhole pressure	

Spacing Order		Increased Density		Location Exception	
Order Number	Unit Size	Order Number	Unit Size	Order Number	Unit Size
626070	640	649063			

Name of common source of supply	VIOLA	Top and bottom of pay section (perforations)	8127 - 8207
Type of production (oil or gas)	Gas	Method of production (flowing or art. lift)	Flowing
Latest test data by zone (oil, gas, and water)	0 bbl/d, 85128 mcf/d, 1188 bbl/d	Wellhead or bottomhole pressure	

Spacing Order		Increased Density		Location Exception	
Order Number	Unit Size	Order Number	Unit Size	Order Number	Unit Size
626070	640	649063			

Name of common source of supply	CANEY	Top and bottom of pay section (perforations)	9894 - 10050
Type of production (oil or gas)	Gas	Method of production (flowing or art. lift)	Flowing
Latest test data by zone (oil, gas, and water)	0 bbl/d, 85128 mcf/d, 1188 bbl/d	Wellhead or bottomhole pressure	

Spacing Order		Increased Density		Location Exception	
Order Number	Unit Size	Order Number	Unit Size	Order Number	Unit Size
613743	640				

If 4A, 4B, or 4D above, and size of units under 8G above are not the same, have the different allocations been addressed? Yes X No

9. List all the operators with mailing addresses within 1/2 mile, producing from the above listed zones.

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Form 1023

10. The operators listed above have been notified and furnished a copy of this application. If no, an affidavit of mailing must be filed no later than five (5) days after submission of this application. Yes No

11. Classification of well (see OAC 165:10-13-2): Gas

12. Attach the Following:

- A. Correlation log section (porosity, resistivity, or gamma ray) with top and bottom of perforated intervals marked.
- B. Diagrammatic sketch of the proposed completion of the well.
- C. Plat showing the location of all wells within 1/2 mile producing from the zones listed above.
- D. If 4B, 4C, or 4D above, a Form 1024, Packer Setting Report, and a Form 1025 Packer Leakage Test.
- E. If 4A, 4B, or 4D above, and size of units under 8G above are not the same, have the different allocations been addressed? Yes No

I hereby certify that I am authorized to submit this application which was 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.

Crissy Venturo

Permit Representative/Agent for Vanguard

(720) 352-7916

Signature

Title

Phone (AC/NO)

394