

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.: 35019254560002

**Completion Report**

Spud Date: July 03, 2011

OTC Prod. Unit No.:

Drilling Finished Date: July 06, 2011

**Amended**

1st Prod Date:

Amend Reason: CHANGE TO INJECTION

Completion Date: May 28, 2011

Recomplete Date: October 05, 2016

**Drill Type: STRAIGHT HOLE**

**SERVICE WELL**

Well Name: A N HARLEY 2-KI

Purchaser/Measurer:

Location: CARTER 19 2S 3W  
NE SW SE SW  
340 FSL 1658 FWL of 1/4 SEC  
Derrick Elevation: 1048 Ground Elevation: 1044

First Sales Date:

Operator: KIESTER OPERATING COMPANY 6999  
PO BOX 705  
16 S PENN AVE  
OKLAHOMA CITY, OK 73101-0705

Completion Type	
X	Single Zone
	Multiple Zone
	Commingled

Location Exception
Order No
There are no Location Exception records to display.

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
PRODUCTION	4 1/2	11.6	J-55	597	800	75	SURFACE

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

**Total Depth: 597**

Packer	
Depth	Brand & Type
354	ARROW TENSION

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
There are no Initial Data records to display.										

Completion and Test Data by Producing Formation									
Formation Name: PERMIAN				Code: 459PRMN			Class: INJ		
Spacing Orders				Perforated Intervals					
Order No		Unit Size		From			To		
There are no Spacing Order records to display.				382			388		
Acid Volumes				Fracture Treatments					
There are no Acid Volume records to display.				There are no Fracture Treatments records to display.					

Formation	Top
SHALE	0
OIL SANDS	376
SHALE	394

Were open hole logs run? No  
Date last log run:  
  
Were unusual drilling circumstances encountered? No  
Explanation:

Other Remarks
UIC PERMIT NUMBER 1506120079

FOR COMMISSION USE ONLY	
Status: Accepted	1134877

API NO 019-25456  
OTC PROD  
UNIT NO

PLEASE TYPE OR USE BLACK INK ONLY

Attach copy of original 1002A  
if recompletion or reentry.

## OKLAHOMA CORPORATION COMMISSION

Oil & Gas Conservation Division  
Post Office Box 52000  
Oklahoma City, Oklahoma 73152-2000

Rule 165:10-3-25

## COMPLETION REPORT

<input type="checkbox"/>	ORIGINAL
<input checked="" type="checkbox"/>	AMENDED (Reason)

## TYPE OF DRILLING OPERATION

☒ STRAIGHT HOLE ☐ DIRECTIONAL HOLE ☐ HORIZONTAL HOLE  
☒ SERVICE WELL

If directional or horizontal, see reverse for bottom hole location.

COUNTY	Carter		SEC	19	TWP	02S	RGE	03W	DATE OF WELL COMPLETION	5-28-2011
LEASE NAME	A.N. Harley						WELL NO.	2-K1	1st PROD DATE	
NE 1/4		SW 1/4	SE 1/4	SW 1/4	FSL OF 1/4 SEC	340	FWL OF 1/4 SEC	1658	RECOMP DATE	10-5-16
ELEVATION N Derrick	1048	Ground	1044	Latitude (if known)			Longitude (if known)			
OPERATOR NAME	Kiester Operating Company							OTC/OCC OPERATOR NO.	6999	
ADDRESS PO Box 705										
CITY Oklahoma City							STATE OK		ZIP 73101-0705	

OKLAHOMA CORPORATION  
COMMON

OCT 31 2016

640 Acres

OIL &amp; GAS CONSERVATION

W

LOCATE WELL

COMPLETION TYPE

<input checked="" type="checkbox"/>	SINGLE ZONE
<input type="checkbox"/>	MULTIPLE ZONE Application Date
<input type="checkbox"/>	COMMINGLED Application Date
LOCATION	
EXCEPTION ORDER	
INCREASED DENSITY	
ORDER NO.	

**CASING & CEMENT** (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE							
INTERMEDIATE							
PRODUCTION	4 1/2	11.6	J-55	597	800	75	Surface
LINER							

PACKER @ <u>354</u>	BRAND & TYPE <u>Arrow tensor</u>	PLUG @ _____	TYPE _____	PLUG @ _____	TYPE _____	TOTAL DEPTH <u>597</u>
PACKER @ _____	BRAND & TYPE _____	PLUG @ _____	TYPE _____	PLUG @ _____	TYPE _____	

## COMPLETION &amp; TEST DATA BY PRODUCING FORMATION

459 PRMN

FORMATION	Permian					
SPACING & SPACING ORDER NUMBER						
CLASS: Oil, Gas, Dry, Inj. Disp, Comm Disp, Svc	Inj					
PERFORATED INTERVALS	382 = 388					
ACID VOLUME						
FRACTURE TREATMENT (Fluids/Prop Amounts)						

Min Gas Allowable (165:10-17-7)

Gas Purchaser/Measurer

OR

First 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					

# AS SUBMITTED

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: Cristl Lodato  
 ADDRESS: PO Box 705  
 CITY: Oklahoma City OK  
 STATE: OK  
 ZIP: 73101  
 DATE: 10/13/2016  
 PHONE NUMBER: (405) 232-7033  
 EMAIL ADDRESS: CristlLodato@gmail.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

A.N. Harley

WELL NO.

Z-K1

NAMES OF FORMATIONS	TOP
Shale	0
Oil Sands	376
Shale	394

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

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

Other remarks:

UIC Permit # 1506120079

640 Acres


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 lease or spacing unit.

Directional surveys are required for all drainholes and directional wells.

640 Acres


BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE

SEC	TWP	RGE	COUNTY
Spot Location			
1/4	1/4	1/4	1/4
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
Depth of Deviation		Radius of Turn	Direction
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line:

LATERAL #2

SEC	TWP	RGE	COUNTY
Spot Location			
1/4	1/4	1/4	1/4
Depth of Deviation		Radius of Turn	Direction
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line:

LATERAL #3

SEC	TWP	RGE	COUNTY
Spot Location			
1/4	1/4	1/4	1/4
Depth of Deviation		Radius of Turn	Direction
Measured Total Depth		True Vertical Depth	BHL From Lease, Unit, or Property Line: