

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.: 35019254530002

**Completion Report**

Spud Date: July 14, 2011

OTC Prod. Unit No.:

Drilling Finished Date: July 14, 2011

**Amended**

1st Prod Date:

Amend Reason: CHANGE TO INJECTION

Completion Date: May 30, 2011

Recomplete Date: September 01, 2016

**Drill Type: STRAIGHT HOLE**

**SERVICE WELL**

Well Name: A N HARLEY 4-KI

Purchaser/Measurer:

Location: CARTER 19 2S 3W  
S2 S2 S2 SW  
320 FSL 1320 FWL of 1/4 SEC  
Derrick Elevation: 0 Ground Elevation: 1027

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	10.6	J-55	596	800	90	SURFACE

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

**Total Depth: 625**

Packer	
Depth	Brand & Type
350	AD-1

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			398		
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	374
SHALE	404

Were open hole logs run? Yes

Date last log run: November 17, 2011

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks
UIC PERMIT NUMBER 150612077

FOR COMMISSION USE ONLY	
Status: Accepted	1134879

API NO. **019-25453**  
OTC PROD.  
UNIT NO.

PLEASE TYPE OR USE BLACK INK ONLY  
NOTE:

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

Form 1002A  
Rev. 2009

☐ ORIGINAL  
☒ AMENDED (Reason)

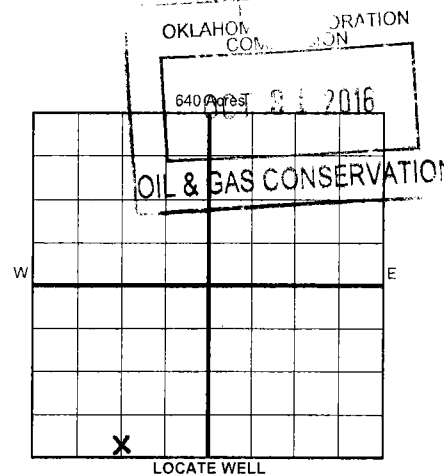
**Change to Injection**

COMPLETION REPORT

TYPE OF DRILLING OPERATION  
☒ STRAIGHT HOLE ☐ DIRECTIONAL HOLE ☐ HORIZONTAL HOLE  
☒ SERVICE WELL

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

COUNTY <b>Carler</b>	SEC <b>19</b>	TWP <b>02S</b>	RGE <b>03W</b>	SPUD DATE <b>7-14-2011</b>
LEASE NAME <b>A.N. Harlen</b>	WELL NO. <b>4-K1</b>	DATE OF WELL COMPLETION <b>5-30-2011</b>	DRLG FINISHED DATE <b>7-14-2011</b>	
<b>8 1/2 1/4 S 1/2 1/4 S 1/2 1/4 SW 1/4</b>	FSL OF 1/4 SEC <b>320</b>	FWL OF 1/4 SEC <b>1320</b>	1st PROD DATE <b>9-1-16</b>	
ELEVATION <b>1027</b>	Latitude (if known)		Longitude (if known)	
OPERATOR NAME <b>Kiester Operating Company</b>	OTC/OCC OPERATOR NO. <b>6999</b>			
ADDRESS <b>PO Box 705</b>				
CITY <b>Oklahoma City</b>		STATE <b>OK</b>	ZIP <b>73101-0705</b>	



COMPLETION TYPE

<input checked="" type="checkbox"/> SINGLE ZONE
<input type="checkbox"/> MULTIPLE ZONE
<input type="checkbox"/> Application Date
<input type="checkbox"/> COMMINGLED
<input type="checkbox"/> 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	<b>4 1/2</b>	<b>10.6</b>	<b>J-55</b>	<b>596.14</b>	<b>800</b>	<b>90</b>	<b>Surface</b>
LINER							

PACKER @ **350** BRAND & TYPE **AD-1** PLUG @ TYPE PLUG @ TYPE TOTAL DEPTH **625**  
PACKER @ BRAND & TYPE PLUG @ TYPE PLUG @ TYPE

COMPLETION & TEST DATA BY PRODUCING FORMATION **459 PRMN**

FORMATION <b>Permian</b>							
SPACING & SPACING ORDER NUMBER							
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc							
PERFORATED INTERVALS <b>Ini 382-398</b>							
ACID/VOLUME							
FRACTURE TREATMENT (Fluids/Prop Amounts)							

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

Gas Purchaser/Measurer

OR

First Sales Date

INITIAL TEST DATA

Oil Allowable (165:10-13-3)

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.

<b>Crist L Lodo</b>	<b>Crist L Lodo</b>	<b>10/13/2016</b>	<b>(405) 232-7033</b>
SIGNATURE	NAME (PRINT OR TYPE)	DATE	PHONE NUMBER
<b>PO Box 705</b>	<b>Oklahoma City</b>	<b>OK</b>	<b>73101</b>
ADDRESS	CITY	STATE	ZIP
<b>CristLlodo@gmail.com</b>			
EMAIL ADDRESS			

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

AN Harley

WELL NO.

4-K1

NAMES OF FORMATIONS	TOP
Shale	0
Oil Sands	374
Shale	404

FOR COMMISSION USE ONLY

ITD on file ☐ YES ☐ NO

APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

2) Reject Codes \_\_\_\_\_

Were open hole logs run? ☒ yes ☐ no

Date Last log was run 11-17-2011

Was CO<sub>2</sub> encountered? ☐ yes ☒ no at what depths? \_\_\_\_\_

Was H<sub>2</sub>S encountered? ☐ yes ☒ no at what depths? \_\_\_\_\_

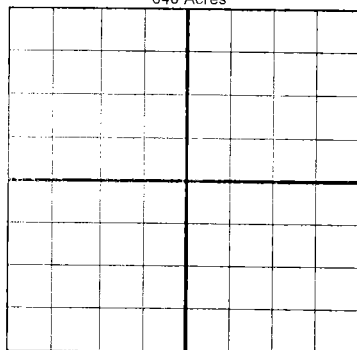
Were unusual drilling circumstances encountered? ☐ yes ☒ no

If yes, briefly explain below \_\_\_\_\_

Other remarks:

UIC permit # 150612077

640 Acres

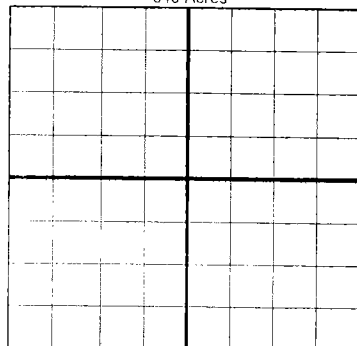


If more than three drainholes are proposed, attach a separate sheet indicating the necessary information.

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: