

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.: 35111275090000

**Completion Report**

Spud Date: August 07, 2016

OTC Prod. Unit No.:

Drilling Finished Date: August 08, 2016

1st Prod Date:

Completion Date: August 24, 2016

**Drill Type: STRAIGHT HOLE**

Well Name: ADMIRE 2

Purchaser/Measurer:

Location: OKMULGEE 5 14N 15E  
SW NW SW NE  
825 FSL 165 FWL of 1/4 SEC  
Derrick Elevation: 0 Ground Elevation: 650

First Sales Date:

Operator: SHANKS ROBERT "BOB" 3065

22780 GRIMES RD  
HASKELL, OK 74436-8809

Completion Type	
<input type="checkbox"/>	Single Zone
<input type="checkbox"/>	Multiple Zone
<input type="checkbox"/>	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
There are no Casing and Cement records to display.							

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

**Total Depth: 950**

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
There are no Initial Data records to display.										

Completion and Test Data by Producing Formation		
Formation Name: N/A	Code:	Class: PLUG AND ABANDON

Formation	Top
SENORA	562

Were open hole logs run? No

Date last log run:

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks
WELL WAS PLUGGED AUGUST 24, 2016. IT WAS A DRY HOLE.

**FOR COMMISSION USE ONLY**

Status: Accepted	1135061
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API NO. 111-27509  
 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

**RECEIVED**

Form 1002A  
 Rev. 2009

NOV 14 2016

ORIGINAL  
 AMENDED (Reason) \_\_\_\_\_

TYPE OF DRILLING OPERATION  
 STRAIGHT HOLE  DIRECTIONAL HOLE  HORIZONTAL HOLE  
 SERVICE WELL  
 If directional or horizontal, see reverse for bottom hole location.

COMPLETION REPORT

COUNTY <u>Oklmulsee</u>	SEC <u>5</u>	TWP <u>4N</u>	RGE <u>15E</u>	SPUD DATE <u>8-7-16</u>
LEASE NAME <u>Admire</u>	WELL NO. <u>2</u>			DRLG FINISHED DATE <u>8-8-16</u>
SW <sup>1/4</sup> NW <sup>1/4</sup> SW <sup>1/4</sup> NE <sup>1/4</sup>	FSL OF 1/4 SEC <u>825</u>	FWL OF 1/4 SEC <u>165</u>	DATE OF WELL COMPLETION <u>8-24-2016</u>	
ELEVATIO N Derrick Ground <u>650</u>	Latitude (if known)			1st PROD DATE
OPERATOR NAME <u>Robert "Bob" Skankis</u>	OTC/OCC OPERATOR NO. <u>3065</u>			RECOMP DATE
ADDRESS <u>22780 Grimes Rd</u>				
CITY <u>Haskell</u>	STATE <u>OK</u>	ZIP <u>74436</u>	Longitude (if known)	

OKLAHOMA CORPORATION COMMISSION


LOCATE WELL

COMPLETION TYPE

SINGLE ZONE  
 MULTIPLE ZONE  
 Application Date \_\_\_\_\_  
 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							
LINER							

PACKER @ \_\_\_\_\_ BRAND & TYPE \_\_\_\_\_ PLUG @ \_\_\_\_\_ TYPE \_\_\_\_\_ PLUG @ \_\_\_\_\_ TYPE \_\_\_\_\_ TOTAL DEPTH 950  
 PACKER @ \_\_\_\_\_ BRAND & TYPE \_\_\_\_\_ PLUG @ \_\_\_\_\_ TYPE \_\_\_\_\_ PLUG @ \_\_\_\_\_ TYPE \_\_\_\_\_

*per pluging report*

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	SPACING & SPACING ORDER NUMBER	CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	PERFORATED INTERVALS	ACID/VOLUME	FRACTURE TREATMENT (Fluids/Prop Amounts)
		<u>Dry P&amp;A</u>			

Min Gas Allowable (165:10-17-7) OR  Gas Purchaser/Measurer First Sales Date \_\_\_\_\_  
 Oil Allowable (165:10-13-3)

INITIAL TEST DATA

INITIAL TEST DATE	<u>N/A</u>			
OIL-BBL/DAY	<u>Dry</u>			
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.

Rogers A. Skankis SIGNATURE      Roger A. Skankis NAME (PRINT OR TYPE)      11-8-16 DATE      918-222-928 PHONE NUMBER  
22780 Grimes Rd ADDRESS      Haskell CITY      OK STATE      74436 ZIP      \_\_\_\_\_ 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 \_\_\_\_\_ WELL NO. \_\_\_\_\_

NAMES OF FORMATIONS	TOP
Sonora 562	

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 \_\_\_\_\_

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: Well was plugged 8-24-16  
It was a Dry Hole

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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 end 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	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	Feet From 1/4 Sec Lines	FSL	FWL
Depth of Deviation		Radius of Turn		Direction		Total Length		
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	Feet From 1/4 Sec Lines	FSL	FWL
Depth of Deviation		Radius of Turn		Direction		Total Length		
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	Feet From 1/4 Sec Lines	FSL	FWL
Depth of Deviation		Radius of Turn		Direction		Total Length		
Measured Total Depth		True Vertical Depth		BHL From Lease, Unit, or Property Line:				