

1. API No. 051-23617 ✓
2. OTC Prod. Unit No. 051-209532-0-0000
3. Date of Application 03/07/2013

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4. Application For (check one)

- A. Commingle Completion in the Wellbore (165:10-3-39)  
 B. Commingle 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 Name EAGLE ROCK MID-CONTINENT OPERATING, LLC	OTC/OCC No. 22050 ✓	Email m.ware@eaglerockenergy.com
Address P.O. BOX 2968		Phone No. (713) 821-8042
City HOUSTON	State TEXAS	Zip 77252-2968
6. Lease Name/Well No. SCOTT 2-17 ✓		FAX No. (281) 408-1495
Location within section: E2 1/4 E2 1/4 NE 1/4 SE ✓ 1/4	Sec. 17	Twp 05N
	Rge 05W ✓	County GRADY ✓

8. The following facts are submitted:	UPPER ZONE	INTERMEDIATE ZONE	LOWER ZONE
A. Name of common source of supply	SYCAMORE ✓	WOODFORD ✓	HUNTON ✓
B. Top and bottom of pay section (perforations)	12842-12936 ✓	12950-13152 ✓	13228-13620 ✓
C. Type of production (oil or gas)	OIL	OIL	OIL
D. Method of production (flowing or art. lift)	FLOWING	FLOWING	FLOWING ✓
E. Latest test data by zone (oil, gas, and water)	COMBINED: 662 MCFD; 332 BOPD; 197 BWPD ✓		
F. Wellhead or bottom hole pressure	620	620	620 ✓
G. Spacing order number and size of unit	271057/160 ✓	271057/160 ✓	271057/160 ✓
H. Increased density order number	599981	599981	599981 ✓
I. Location exception order number and penalty	600749	600749	600749 ✓

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

9. List all operators with mailing addresses within 1/2 mile, producing from the above listed zones.	Oklahoma Corporation Commission Oil & Gas Division
SEE ATTACHED. ✓	<b>Approved</b>

10. The operators listed above have been notified and furnished a copy of this application.  Yes  No  
 If no, an affidavit of mailing must be filed not later than five (5) days after submission of this application.

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

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 the 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.

Mona P. Ware Signature LEAD REGULATORY ANALYST Title (713) 821-8042 Phone (AC/NO)

OCC USE ONLY

Staff Signature \_\_\_\_\_ Phone No. \_\_\_\_\_ Date 3, 22, 13  Approved  Rejected



**OFFSET OPERATORS**

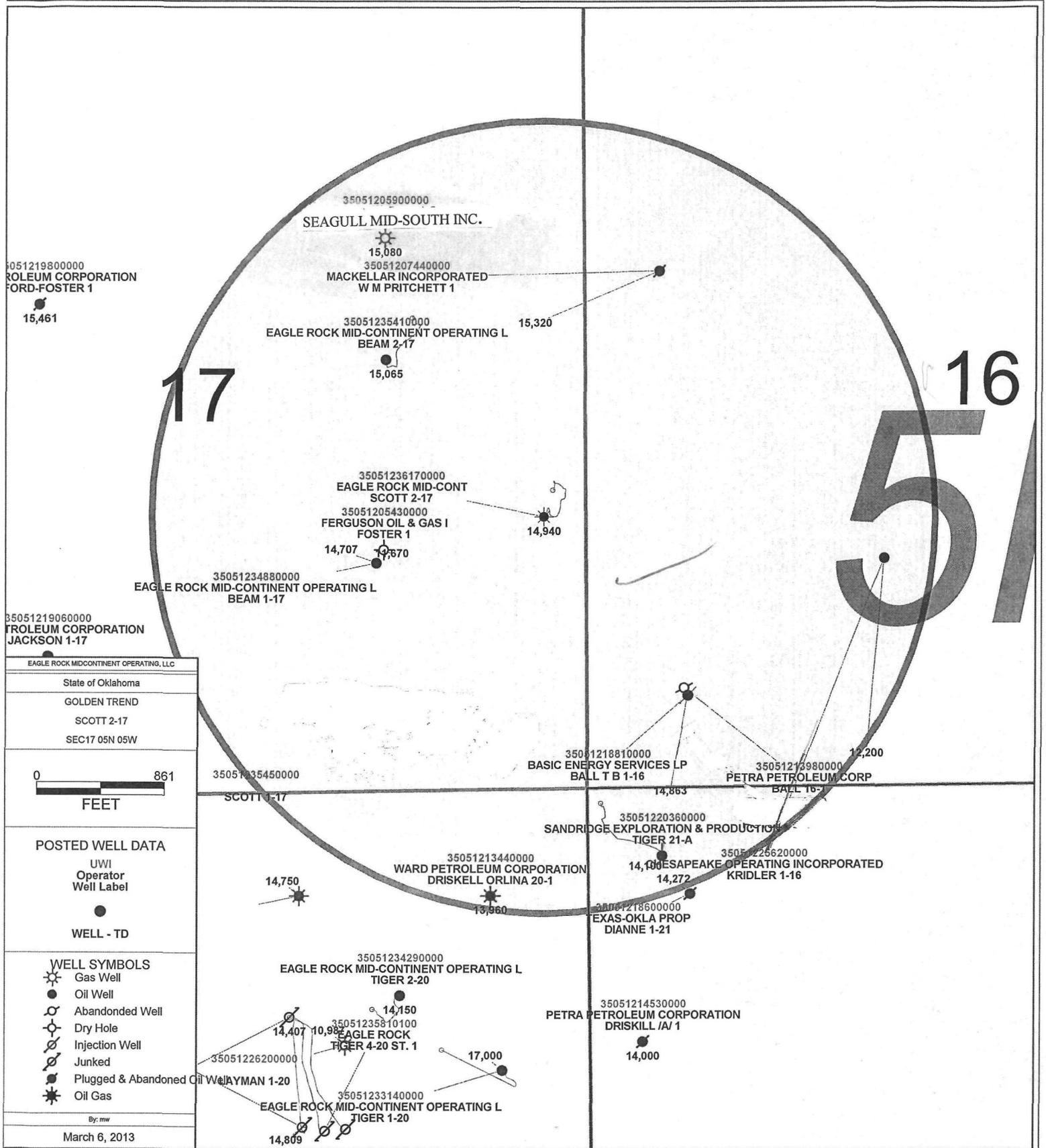
SCOTT 2-17  
SECTION 17-T05N-R05W  
GRADY COUNTY, OK

WARD PETROLEUM CORPORATION  
P.O. BOX 1187  
ENID, OKLAHOMA 73702-1187

SEAGULL MID-SOUTH INC.  
1001 FANNIN, SUITE 1700  
HOUSTON, TEXAS 77002

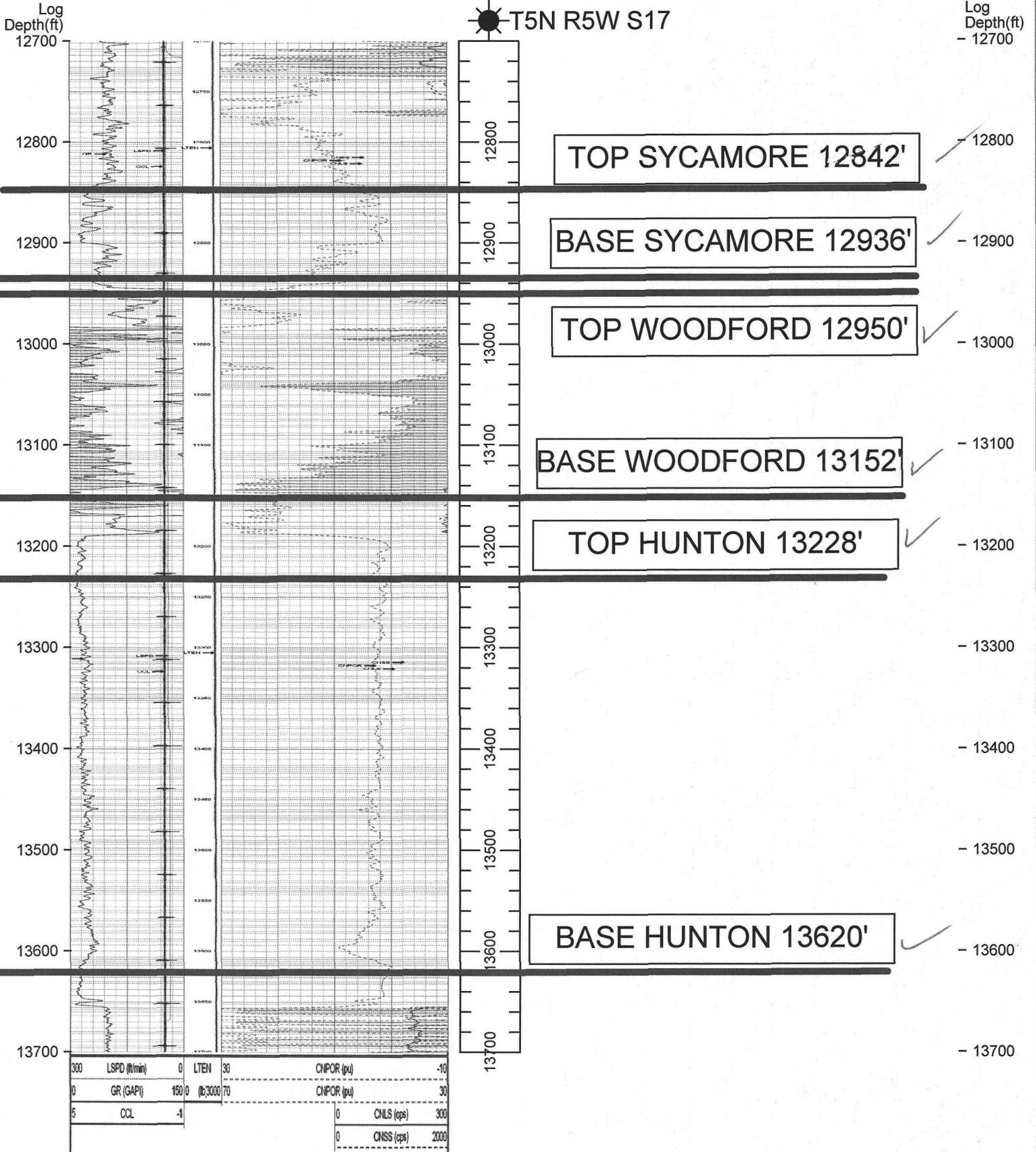
CHESAPEAKE OPERATING INC.  
P.O. BOX 18496  
OKLAHOMA CITY, OKLAHOMA 73154-0496

SANDRIDGE EXPLORATION & PRODUCTION LLC  
123 ROBERT S. KERR AVE., SUITE 1702  
OKLAHOMA CITY, OKLAHOMA 73102-6406



SCOTT 2-17 ✓

☀ T5N R5W S17



HS=1