

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.: 35141204730000

Completion Report

Spud Date: October 14, 2013

OTC Prod. Unit No.:

Drilling Finished Date: October 21, 2013

1st Prod Date: December 18, 2013

Completion Date: November 20, 2013

Drill Type: STRAIGHT HOLE

Well Name: HORTON 3

Purchaser/Measurer:

Location: TILLMAN 11 3S 19W
 N2 NE SE NE
 1240 FSL 2310 FWL of 1/4 SEC
 Derrick Elevation: 0 Ground Elevation: 1247

First Sales Date:

Operator: AC OPERATING COMPANY LLC 23061

952 ECHO LN STE 390
 HOUSTON, TX 77024-2851

Completion Type	
X	Single Zone
	Multiple Zone
	Commingled

Location Exception	
Order No	
619492	

Increased Density	
Order No	
616718	

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE	8 5/8	24	K-55	200		130	SURFACE
PRODUCTION	5 1/2	15.5	N-80	5160		200	3730

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

Total Depth: 5160

Packer	
Depth	Brand & Type
4841	MODEL R

Plug	
Depth	Plug Type
5058	CIBP

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
Dec 02, 2013	STRAWN	80	40				SWAB TE	275	OPEN	

Completion and Test Data by Producing Formation

Formation Name: STRAWN Code: 404STRN Class: OIL

Spacing Orders	
Order No	Unit Size
599151	80

Perforated Intervals	
From	To
5064	5075

Acid Volumes
1,500 GALLONS 10%

Fracture Treatments
There are no Fracture Treatments records to display.

Formation Name: STRAWN Code: 404STRN Class: OIL

Spacing Orders	
Order No	Unit Size
599151	80

Perforated Intervals	
From	To
4976	5013

Acid Volumes
4,000 GALLONS 20% WITH NITROGEN

Fracture Treatments
There are no Fracture Treatments records to display.

Formation	Top
TOP CANYON	3354
TOP STRAWN	4186
TOP MISSISSIPPIAN	5142

Were open hole logs run? Yes
Date last log run: October 20, 2013
Were unusual drilling circumstances encountered? No
Explanation:

Other Remarks
There are no Other Remarks.

FOR COMMISSION USE ONLY

1122377

Status: Accepted

AS SUBMITTED

RECEIVED

DEC 27 2013

OKLAHOMA CORPORATION
COMMISSION

API NO. 141-20473
OTC PROD. UNIT NO. 23061

PLEASE TYPE OR USE BLACK INK
NOTE:

Attach copy of original 1002A if recompletion or reentry

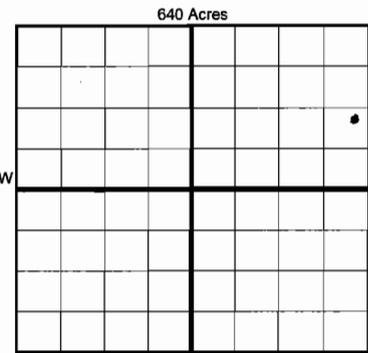
Rule 165:10-3-25

COMPLETION REPORT

ORIGINAL
 AMENDED (Reason) _____

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

SPUD DATE 10/14/2013
DRLG FINISHED DATE 10/21/2013
DATE OF WELL COMPLETION 11/20/2013
1st PROD DATE 12/18/2013



If directional or horizontal, see reverse for bottom hole location.
COUNTY Tillman SEC 11 TWP 835 RGE 19W
LEASE NAME HORTON WELL NO. 3
N 24 NE 1/4 SE 1/4 NE 1/4 FSL OF 1/4 SEC 1240 FWL OF 1/4 SEC 2310
ELEVATION Ground 1247 Latitude (if known) _____ Longitude (if known) _____
OPERATOR NAME AC Operating Company, LLC OTC/OCC OPERATOR NO. 23061
ADDRESS 952 Echo Lane, Suite 390
CITY Houston STATE TX ZIP 77024

COMPLETION TYPE
 SINGLE ZONE
 MULTIPLE ZONE
Application Date _____
COMINGLED Application Date _____
LOCATION EXCEPTION ORDER INCREASED DENSITY ORDER NO. 619492
616718

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP OF CMT
CONDUCTOR							
SURFACE	<u>8 5/8</u>	<u>24#</u>	<u>K-55</u>	<u>200'</u>		<u>130</u>	<u>Surface</u>
INTERMEDIATE							
PRODUCTION	<u>6 1/2</u>	<u>15.5#</u>	<u>N-80</u>	<u>5160</u>		<u>200</u>	<u>3730</u>
LINER							

PACKER @ 4841 BRAND & TYPE MODEL R PLUG @ 5058 TYPE UBP PLUG @ _____ TYPE _____ TOTAL DEPTH 5160
PACKER @ _____ BRAND & TYPE _____ PLUG @ _____ TYPE _____ PLUG @ _____ TYPE _____

COMPLETION & TEST DATA BY PRODUCING FORMATION 4045TRN

FORMATION	SPACING & SPACING ORDER NUMBER	CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp, Svc	PERFORATED INTERVALS	ACID/VOLUME	FRACTURE TREATMENT (Fluids/Prop Amounts)
<u>STRAWN</u>	<u>599151 (80)</u>	<u>OIL</u>	<u>5064-75</u>	<u>1500 gal 10%</u>	
<u>STRAWN</u>	<u>599151 (80)</u>	<u>OIL</u>	<u>4976-5013</u>	<u>4000g 20% w/nitrogen</u>	

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

INITIAL TEST DATA

INITIAL TEST DATE	<u>12/21/2013</u>
OIL-BBL/DAY	<u>80</u>
OIL-GRAVITY (API)	<u>40</u>
GAS-MCF/DAY	<u>-</u>
GAS-OIL RATIO CU FT/BBL	<u>-</u>
WATER-BBL/DAY	<u>-</u>
PUMPING OR FLOWING	<u>SWAB TEST</u>
INITIAL SHUT-IN PRESSURE	<u>275</u>
CHOKE SIZE	<u>OPEN</u>
FLOW TUBING PRESSURE	<u>-</u>

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.

Michael A Odegaard SIGNATURE NAME (PRINT OR TYPE) MICHAEL A ODEGARD
DATE 12/23/13 PHONE NUMBER 7138819030
ADDRESS 952 ECHO LANE STE 390 CITY HOUSTON STATE TX ZIP 77024 EMAIL ADDRESS maodegaard@acorporation.com

SCANNED

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 HORTON WELL NO. 3

NAMES OF FORMATIONS	TOP
Top CANYON	3354
Top STAWN	4186
Top MISSISSIPPIAN	5142

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 10/20/13

Was CO₂ encountered? yes no at what depths? _____

Was H₂S encountered? yes no at what depths? _____

Were unusual drilling circumstances encountered? yes no
If yes, briefly explain below _____

Other remarks: _____

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