



RAILROAD COMMISSION OF TEXAS

Form W-2

1701 N. Congress
P.O. Box 12967
Austin, Texas 78701-2967

Status: Approved
Date: 02/20/2013
Tracking No.: 37417

OIL WELL POTENTIAL TEST, COMPLETION OR RECOMPLETION REPORT,

OPERATOR INFORMATION			
Operator	SANDRIDGE EXPL. AND PROD., LLC	Operator	748011
Operator	123 ROBERT S KERR AVE OKLAHOMA CITY, OK 73102-6406		

WELL INFORMATION			
API	42-003-38951	County:	ANDREWS
Well No.:	12	RRC District	08
Lease	UNIVERSITY 'I'	Field	FUHRMAN-MASCHO
RRC Lease	42267	Field No.:	33176001
Location	Section: 32, Block: 13, Survey: UL, Abstract: 000000		
Latitude		Longitud	
This well is _____ miles in a _____ direction from _____ 11 MILES NORTHWEST OF ANDREWS, which is the nearest town in the _____			

FILING INFORMATION			
Purpose of	Well Record Only		
Type of	Plug Back		
Well Type:	Producing	Completion or Recompletion	11/17/2011
Type of Permit	Date	Permit No.	
Permit to Drill, Plug Back, or	02/01/2012	732275	
Rule 37 Exception			
Fluid Injection			
O&G Waste Disposal			
Other:			

COMPLETION INFORMATION			
Spud		Date of first production after rig	11/17/2011
Date plug back, deepening, drilling operation	09/01/2011	Date plug back, deepening, recompletion, drilling operation	11/17/2011
Number of producing wells on this lease this field (reservoir) including this	1	Distance to nearest well in lease & reservoir	0.0
Total number of acres in	320.00	Elevation	3294 GL
Total depth TVD	10896	Total depth MD	
Plug back depth TVD	4468	Plug back depth MD	
Was directional survey made other inclination (Form W-	No	Rotation time within surface casing Is Cementing Affidavit (Form W-15)	No
Recompletion or	No	Multiple	No
Type(s) of electric or other log(s)	None		
Electric Log Other Description:			
Location of well, relative to nearest lease of lease on which this well is	330.0 Feet from the	Off Lease :	No
	800.0 Feet from the	South Line and	
		West Line of the	
		UNIVERSITY 'I' Lease.	

FORMER FIELD (WITH RESERVOIR) & GAS ID OR OIL LEASE NO.			
Field & Reservoir	Gas ID or Oil Lease	Well No.	Prior Service Type
W2:	N/A		

PACKET	FULLERTON, SOUTH (ELLENBURGER)	01784	12
FOR NEW DRILL OR RE-ENTRY, SURFACE CASING DEPTH DETERMINED BY:			
GAU Groundwater Protection Determination	Depth	Date	08/06/1991
SWR 13 Exception	Depth		

INITIAL POTENTIAL TEST DATA FOR NEW COMPLETION OR RECOMPLETION			
Date of	12/01/2011	Production	Pumping
Number of hours	24	Choke	
Was swab used during this	No	Oil produced prior to	
PRODUCTION DURING TEST PERIOD:			
Oil	8.00	Gas	13
Gas - Oil	1625	Flowing Tubing	281.00
Water	160		
CALCULATED 24-HOUR RATE			
Oil	8.0	Gas	13
Oil Gravity - API - 60.:	32.0	Casing	56.00
Water	160		

CASING RECORD												
Ro	Type of Casing	Casing	Hole	Setting	Multi -	Multi -	Cement	Cement	Slurry	Top of	TOC	
		Size (in.)	Size	Depth	Stage	Tool	Stage	Shoe	Class	Amoun	Volume (cu.)	Cement (ft.)
1		13 3/8	17 1/2	254				CLASS C	250	403.0	SURF	
2		8 5/8	12 1/4	4002				CLASS C	1000	2029.0	SURF	
3		5 1/2	7 7/8	10896				CLASS H	1350	1018.0	3500	
4		5 1/2	7 7/8	4468				& C C	1	1.0	4467	

LINER RECORD									
<u>Ro</u>	<u>Liner Size</u>	<u>Hole Size</u>	<u>Liner Top</u>	<u>Liner Bottom</u>	<u>Cement Class</u>	<u>Cement Amoun</u>	<u>Slurry Volume (cu.)</u>	<u>Top of Cement (ft.)</u>	<u>TOC Determined</u>
N/A									

TUBING RECORD			
<u>Ro</u>	<u>Size (in.)</u>	<u>Depth Size (ft.)</u>	<u>Packer Depth (ft.)/Type</u>
1	2 7/8	4348	/

PRODUCING/INJECTION/DISPOSAL INTERVAL			
<u>Ro</u>	<u>Open hole?</u>	<u>From (ft.)</u>	<u>To (ft.)</u>
1	No	L 4405	4468.0

ACID, FRACTURE, CEMENT SQUEEZE, CAST IRON BRIDGE PLUG, RETAINER, ETC.

Was hydraulic fracturing treatment	No
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Is well equipped with a downhole sleeve? No	If yes, actuation pressure

Production casing test pressure (PSIG) during hydraulic fracturing	Actual maximum pressure (PSIG) during fracturing
10,000	10,000
12,000	12,000
14,000	14,000
16,000	16,000
18,000	18,000
20,000	20,000
22,000	22,000
24,000	24,000
26,000	26,000
28,000	28,000
30,000	30,000
32,000	32,000
34,000	34,000
36,000	36,000
38,000	38,000
40,000	40,000
42,000	42,000
44,000	44,000
46,000	46,000
48,000	48,000
50,000	50,000
52,000	52,000
54,000	54,000
56,000	56,000
58,000	58,000
60,000	60,000
62,000	62,000
64,000	64,000
66,000	66,000
68,000	68,000
70,000	70,000
72,000	72,000
74,000	74,000
76,000	76,000
78,000	78,000
80,000	80,000
82,000	82,000
84,000	84,000
86,000	86,000
88,000	88,000
90,000	90,000
92,000	92,000
94,000	94,000
96,000	96,000
98,000	98,000
100,000	100,000

Has the hydraulic fracturing fluid disclosure been	No
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<u>Ro</u>	<u>Type of Operation</u>	<u>Amount and Kind of Material Used</u>	<u>Depth Interval (ft.)</u>	
1		95 BBL ACID, 233294# PROP & 3052 BBLS TOTAL FLUID	4405	4468

FORMATION RECORD

<u>Formations</u>	<u>Encountere</u>	<u>Depth TVD</u>	<u>Depth MD</u>	<u>Is formation</u>	<u>Remarks</u>
SAN ANDRES		4456.0			
CLEARFORK		6052.0			
DEVONIAN		8358.0			

Do the producing interval of this well produce H ₂ S with a concentration in excess of 100 ppm	No
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Is the completion being downhole commingled	No
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REMARKS

RRC REMARKS

PUBLIC COMMENTS:

CASING RECORD :

TUBING RECORD:

PRODUCING/INJECTION/DISPOSAL INTERVAL :

ACID, FRACTURE, CEMENT SQUEEZE, CAST IRON BRIDGE PLUG, RETAINER, ETC. :

A CIBP WAS SET IN THE 5.5" CASING AT A DEPTH OF 4468'. 1/2 - 1 SK OF CEMENT COVERS THE CIBP. DUE TO THE SMALL AMOUNT OF CEMENT DUMPED A W15 WAS NOT PREPARED.

POTENTIAL TEST DATA:

OPERATOR'S CERTIFICATION			
Printed	Spencer Laird	Title:	Regulatory Analyst
Telephone	(405) 429-6518	Date	03/27/2012

CERTIFICATE OF COMPLIANCE
AND TRANSPORTATION AUTHORITY

P-4

This facsimile P-4 was generated electronically from data submitted to the RRC.
A certification of the automated data is available in the RRC's Austin office.

Tracking No.: 37417

1. Field name exactly as shown on proration schedule FUHRMAN-MASCHO		2. Lease name as shown on proration schedule UNIVERSITY 'I'							
3. Current operator name exactly as shown on P-5 Organization Report SANDRIDGE EXPL. AND PROD., LLC		4. Operator P-5 no. 748011	5. Oil Lse/Gas ID no 42267	6. County ANDREWS	7. RRC district 08				
8. Operator address including city, state, and zip code 123 ROBERT S KERR AVE OKLAHOMA CITY, OK 73102-6406		9. Well no(s) (see instruction E) 12							
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)			11. Effective Date 11/17/2011				
12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G) a. Change of: <input type="checkbox"/> operator <input type="checkbox"/> oil or condensate gatherer <input type="checkbox"/> gas gatherer <input type="checkbox"/> gas purchaser <input type="checkbox"/> gas purchaser system code <input type="checkbox"/> field name from _____ <input type="checkbox"/> lease name from _____ OR b. New RRC Number for: <input checked="" type="checkbox"/> oil lease <input type="checkbox"/> gas well Due to: <input type="checkbox"/> new completion or recompletion <input type="checkbox"/> reclass oil to gas <input type="checkbox"/> reclass gas to oil <input type="checkbox"/> other well (specify) _____ <input type="checkbox"/> consolidation, unitization, or subdivision (oil lease only)									
13. Authorized GAS WELL GAS or CASINGHEAD GAS Gatherer(s) and/or Purchaser(s). (See instruction G).									
Gatherer	Purchaser	Name of GAS WELL GAS or CASINGHEAD GAS Gatherer(s) or Purchaser(s) As Indicated in Columns to the Left (Attach an additional sheet in same format if more space is needed)			Purchaser's RRC Assigned System Code	Percent of Take	Full-well stream		
X	X	DCP MIDSTREAM, LP(195918)			0001	100.0			
14. Authorized OIL or CONDENSATE Gatherer(s). (See instruction G).									
Name of OIL or CONDENSATE Gatherer(s) - List Highest Volume Gatherer First (Attach an additional sheet in same format if more space is needed)						Percent of Take			
OASIS TRANSP & MARKETING CORP.(617482)						100.0			
RRC USE ONLY: Reviewer's initials: <u>RRC Staff</u> Approval date: <u>02/20/2013</u>									
15. PREVIOUS OPERATOR CERTIFICATION FOR CHANGE OF OPERATOR P-4 FILING. Being the PREVIOUS OPERATOR, I certify that operating responsibility for the well(s) designated in this filing, located on the subject lease has been transferred in its entirety to the above named Current Operator. I understand, as Previous Operator, that designation of the above named operator as Current Operator is not effective until this certificate is approved by the Commission. <table style="width:100%;"><tr><td style="width:50%;">Name of Previous Operator _____ Name (print) _____ Title _____</td><td style="width:50%;">Signature _____ <input type="checkbox"/> Authorized Employee of previous operator _____ <input type="checkbox"/> Authorized agent of previous operator (see instruction G) _____ Date _____ Phone with area code _____</td></tr></table>								Name of Previous Operator _____ Name (print) _____ Title _____	Signature _____ <input type="checkbox"/> Authorized Employee of previous operator _____ <input type="checkbox"/> Authorized agent of previous operator (see instruction G) _____ Date _____ Phone with area code _____
Name of Previous Operator _____ Name (print) _____ Title _____	Signature _____ <input type="checkbox"/> Authorized Employee of previous operator _____ <input type="checkbox"/> Authorized agent of previous operator (see instruction G) _____ Date _____ Phone with area code _____								
16. CURRENT OPERATOR CERTIFICATION. By signing this certificate as the Current Operator, I certify that all statements on this form are true and correct and I acknowledge responsibility for the regulatory compliance of the subject lease including plugging of well(s) pursuant to Rule 14. I further acknowledge that I assume responsibility for the physical operation, control, and proper plugging of each well designated in this filing. I also acknowledge that I will remain designated as the Current Operator until a new certificate designating a new Current Operator is approved by the Commission. <table style="width:100%;"><tr><td style="width:50%;">Name (print) <u>SANDRIDGE EXPL. AND PROD., LLC</u> Regulatory Analyst _____ Title <u>slaird@sandridgeenergy.com</u> E-mail Address (optional) _____</td><td style="width:50%;">Signature <u>Spencer Laird</u> <input checked="" type="checkbox"/> Authorized Employee of current operator _____ <u>01/14/2013</u> Date _____ <u>(405) 429-6518</u> Phone with area code _____</td></tr></table>								Name (print) <u>SANDRIDGE EXPL. AND PROD., LLC</u> Regulatory Analyst _____ Title <u>slaird@sandridgeenergy.com</u> E-mail Address (optional) _____	Signature <u>Spencer Laird</u> <input checked="" type="checkbox"/> Authorized Employee of current operator _____ <u>01/14/2013</u> Date _____ <u>(405) 429-6518</u> Phone with area code _____
Name (print) <u>SANDRIDGE EXPL. AND PROD., LLC</u> Regulatory Analyst _____ Title <u>slaird@sandridgeenergy.com</u> E-mail Address (optional) _____	Signature <u>Spencer Laird</u> <input checked="" type="checkbox"/> Authorized Employee of current operator _____ <u>01/14/2013</u> Date _____ <u>(405) 429-6518</u> Phone with area code _____								