

RAILROAD COMMISSION OF TEXAS

Oil and Gas Division

Tracking No.: 112314

Status: Work in Progress

This facsimile W-2 was generated electronically
from data submitted to the RRC.

API No. 42- 495-33544

7. RRC District No.
08

8. RRC Lease No.

Oil Well Potential Test, Completion or Recompletion Report, and Log

1. FIELD NAME (as per RRC Records or Wildcat) PHANTOM (WOLFCAMP)		2. LEASE NAME UNIVERSITY 20-10 WNK		9. Well No. 1H	
3. OPERATOR'S NAME (Exactly as shown on Form P-5, Organization Report) SHELL WESTERN E&P		RRC Operator No. 774719		10. County of well site WINKLER	
4. ADDRESS PO BOX 576 HOUSTON, TX 77001-0000				11. Purpose of filing Initial Potential <input checked="" type="checkbox"/> Retest <input type="checkbox"/> Reclass <input type="checkbox"/> Well record only (Explain in remarks) <input type="checkbox"/>	
5. If Operator has changed within last 60 days, name former operator					
6a. Location (Section, Block, and Survey) 10, 20, UL		6b. Distance and direction to nearest town in this county. WINK			
12. If workover or reclass, give former field (with reservoir) & Gas ID or oil lease no. FIELD & RESERVOIR N/A			GAS ID or OIL LEASE #	Oil-O Gas-G	Well #
13. Type of electric or other log run Resistivity only			14. Completion or recompletion date 07/13/2014		

SECTION I- POTENTIAL TEST DATA IMPORTANT: Test should be for 24 hours unless otherwise specified infield rules.

15. Date of test 07/31/2014	16. No. of hours tested 24	17. Production method (Flowing, Gas Lift, Jetting, Pumping- Size & Type of pump) Flowing			18. Choke size 16/64
19. Production during Test Period	Oil - BBLS 478.0	Gas - MCF 664	Water - BBLS 1194	Gas - Oil Ratio 1389	Flowing Tubing Pressure 2235.0 PSI
20. Calculated 24- Hour Rate	Oil - BBLS 478.0	Gas - MCF 664	Water - BBLS 1194	Oil Gravity-API-60° 46.5	Casing Pressure 2062.0 PSI
21. Was swab used during this test? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		22. Oil produced prior to test (New & Reworked wells) 10222.0			23. Injection Gas-Oil Ratio
REMARKS: N/A					

INSTRUCTIONS: File an original and one copy of the completed Form W-2 in the appropriate RRC District Office within 30 days after completing a well and within 10 days after a potential test. If an operator does not properly report the results of a potential test within the 10-day period, the effective date of the allowable assigned to the well will not extend back more than 10 days before the W-2 was received in the District Office. (Statewide Rules 16 and 51) To report a completion or recompletion, fill in both sides of this form. To report a retest, fill in only the front side.

WELL TESTERS CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I conducted or supervised this test by observation of (a) meter readings or (b) the top and bottom gauges of each tank into which production was run during the test. I further certify that the potential test data shown above is true, correct, and complete, to the best of my knowledge.

Signature: Well Tester

Name of Company

RRC Representative

OPERATOR'S CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this report, that this report was prepared by me or under my supervision and direction, and that data and facts stated therein are true, correct and complete, to the best of my knowledge.

SHELL WESTERN E&P

Type or printed name of operator's representative

(832) 377-0953

08/12/2014

Telephone: Area Code

Number

Month Day Year

Regulatory Specialist

Title of Person

Maureen Kovacic

Signature

SECTION III										DATA ON WELL COMPLETION AND LOG (Not Required on Retest)			
24. Type of Completion New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Plug Back <input type="checkbox"/> Other <input checked="" type="checkbox"/>						25. Permit to Drill, Plug Back or Deepen DATE 12/31/2013 PERMIT NO. 775589 Rule 37 Exception CASE NO.							
26. Notice of Intention to Drill this well was filed in Name of SHELL WESTERN E&P						Water Injection Permit PERMIT NO. Salt Water Disposal Permit PERMIT NO. Other PERMIT NO.							
27. Number of producing wells on this lease in this field (reservoir) including this well 1			28. Total number of acres in this lease 641.31										
29. Date Plug Back, Deepening, Workover or Drilling Operations: 02/04/2014		Commenced 03/15/2014		Completed 0.0		30. Distance to nearest well, Same Lease & Reservoir							
31. Location of well, relative to nearest lease boundaries 245.0 Feet From North Line and 2600.0 Feet from West Line of the UNIVERSITY 20-10 WNK Lease													
32. Elevation (DF, RKB, RT, GR ETC.) 2796 GL				33. Was directional survey made other than inclination (Form W-12)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
34. Top of Pay		35. Total Depth 11658 MD:16627		36. P. B. Depth MD:16451		37. Surface Casing Determined by Field Rules <input type="checkbox"/> Recommendation of T.D.W.R. <input checked="" type="checkbox"/> Railroad Commission (Special) <input type="checkbox"/>		Dt. of Letter 01/02/2014 Dt. of Letter					
38. Is well multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
39. If multiple completion, list all reservoir names (completions in this well) and Oil Lease or Gas ID No. FIELD & RESERVOIR N/A						GAS ID or OIL LEASE #		Oil-G Gas-G					
40. Intervals Drilled by: Rotary Tools <input checked="" type="checkbox"/> Cable Tools						41. Name of Drilling Contractor		42. Is Cementing Affidavit Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
43. CASING RECORD (Report All Strings Set in Well)													
CASING SIZE	WT #/FT.	DEPTH SET	MULTISTAGE TOOL DEPTH	TYPE & AMOUNT CEMENT (sacks)	HOLE SIZE	TOP OF CEMENT	SLURRY VOL. cu. ft.						
9 5/8		5092	405	C 360	12 1/4	SURFACE	87.0						
9 5/8		5092		C 2450	12 1/4	405	4761.0						
7		11934		H 720	8 3/4	1602	1602.0						
44. LINER RECORD													
Size	Top	Bottom	Sacks Cement	Screen									
4 1/2	11111	16456											
45. TUBING RECORD													
Size	Depth Set	Packer Set	From L1 11967	To 16281									
2 7/8	11012	10984	From	To									
			From	To									
			From	To									
46. PRODUCING INTERVAL (this completion) Indicate depth of perforation or open hole													
47. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.													
Depth Interval			Amount and Kind of Material Used										
11967.0 16281.0			WELL DATA UPLOADED INTO FRAC FOCUS										
48. FORMATION RECORD (LIST DEPTHS OF PRINCIPAL GEOLOGICAL MARKERS AND FORMATION TOPS)													
Formations	Depth	Formations	Depth										
RUSTLER - POSSIBLE FLOW; POSSIBLE USABLE QUALITY W		STRAWN											
COLBY-QUEEN		PENNSYLVANIAN											
YATES		MISSISSIPPIAN											
QUEEN-SEVEN RIVERS		DEVONIAN											
SAN ANDRES - HIGH FLOWS, H2S, CORROSIVE		SILURIAN											
HOLT		FUSSELMAN											

48.	FORMATION RECORD (LIST DEPTHS OF PRINCIPAL GEOLOGICAL MARKERS AND FORMATION TOPS)			
	Formations	Depth	Formations	Depth
	GLORIETA		ELLENBURGER	
	CLEARFORK		DELAWARE	5157.0 MD: 5166.0
	WICHITA ALBANY		CHERRY CANYON	6136.0 MD: 6145.0
	CANYON		BRUSHY CANYON	7472.0 MD: 7481.0
	MONTOYA		BONE SPRINGS	9535.0 MD: 9545.0
	WADDELL		WOLFCAMP	11700.0 MD: 11937.0
	ATOKA			
REMARKS: KOP @ 11351. THIS PACKET PROVIDES COMPLETION DATA, IP AND UPDATED P4. PLEASE SEE PACKET 107536 FOR ALL OTHER REQUIRED DOCUMENTS.				

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.: 112314

1. Field name exactly as shown on proration schedule PHANTOM (WOLFCAMP)		2. Lease name as shown on proration schedule UNIVERSITY 20-10 WNK				
3. Current operator name exactly as shown on P-5 Organization Report SHELL WESTERN E&P		4. Operator P-5 no. 774719	5. Oil Lse/Gas ID no	6. County WINKLER	7. RRC district 08	
8. Operator address including city, state, and zip code PO BOX 576 HOUSTON, TX 77001		9. Well no(s) (see instruction E) 1H				
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)				
		11. Effective Date 07/13/2014				
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 checked="" 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		ACCESS MLP OPERATING, L.L.C.(003389)			100.0	
	X	REGENCY FIELD SERVICES LLC(698769)		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	
EASTEX CRUDE COMPANY(239232)					50.0	
BKEP CRUDE, L.L.C.(072624)					50.0	
RRC USE ONLY: Reviewer's initials: _____ Approval date: _____						
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.						
Name of Previous Operator <hr/> Name (print) <hr/> Title <hr/>			Signature <input type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G) <hr/> Date <hr/> Phone with area code <hr/>			
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.						
SHELL WESTERN E&P Name (print) Regulatory Specialist Title maureen.kovacic@shell.com E-mail Address (optional)			Maureen Kovacic Signature <input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G) 08/12/2014 Date <hr/> (832) 377-0953 Phone with area code			