

OPERATOR NAME AND ADDRESS including city, state and zip 817555 P O BOX 2249 WICHITA FALLS, TX, 76307		<b>OIL WELL STATUS REPORT</b>  RAILROAD COMMISSION OF TEXAS Oil and Gas Division P.O. Box 12967 Austin, TX 78711-2967 Tracking 1424998 Status: Pending		Reason for Filing <input checked="checked" type="checkbox"/> Survey <input type="checkbox"/> Retest		Operator P-5 Organization 817555		RRC Dist. No. 08		<b>W-10</b> Rev.7/95 www-1	
						Test Period: 11/2019 through 04/2020 Due Date: 05/01/2020 Effective Date: 06/01/2020					
FIELD NAME * LEASE NAME	LEASE NO.	WELL NO	F- FLOWING P- PUMPING G- GAS LIFT S- SWABBING	DATE TESTED MO/DAY/YR	OIL PRODUCED (BBL/DAY)	WATER PRODUCED (BBL/DAY)	GAS PRODUCED (MCF/DAY)	SHUT-IN X			
FULLERTON UNIVERSITY 15 "A"	25152	3	PUMPING	12/10/2019	2.5 BBL	2 BBL	4 MCF				
FULLERTON UNIVERSITY 15 "A"	25152	5	PUMPING	01/08/2020	2.7 BBL	9 BBL	3 MCF				
FULLERTON UNIVERSITY 15 "A"	25152	6	PUMPING	01/20/2020	5.5 BBL	4 BBL	5 MCF				
FULLERTON UNIVERSITY 15 "A"	25152	8	PUMPING	01/31/2020	4.0 BBL	6 BBL	4 MCF				
FULLERTON UNIVERSITY 15 "B"	25587	1	PUMPING	12/19/2019	3.0 BBL	3 BBL	3 MCF				
FULLERTON UNIVERSITY 15 "B"	25587	2	PUMPING	02/01/2020	1.5 BBL	3 BBL	3 MCF				
FULLERTON UNIVERSITY 15 "B"	25587	5	PUMPING	02/02/2020	5.0 BBL	3 BBL	9 MCF				
FULLERTON UNIVERSITY 15 "B"	25587	6	PUMPING	01/15/2020	7.0 BBL	19 BBL	9 MCF				
					BBL	BBL	MCF				
					BBL	BBL	MCF				

CERTIFICATION: I declare under penalties prescribed in Texas Natural Resources Code, Sec.91.143., 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 herein are true, correct, and complete to the best of my knowledge

Signature: Cindy Walker, Engineering Assistant Title: Engineering Assistant Phone: (940) 716-5374 Date: 04/01/2020

\* AN ASTERISK PREPRINTED ON A SURVEY IDENTIFIES WELL SUBJECT TO COMMINGLING TEST REQUIREMENT

"X" AN "X" IS PLACED IN THE SHUT-IN BLOCK TO INDICATE THE WELL IS SHUT-IN