

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1

January 2018

Form must be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion:

New Well  Re-Entry  Workover

Oil  WSW  SWD

Gas  DH  EOR

OG  GSW

CM (Coal Bed Methane)

Cathodic  Other (Core, Expl., etc.): \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Deepening  Re-perf.  Conv. to EOR  Conv. to SWD

Plug Back  Liner  Conv. to GSW  Conv. to Producer

Commingled Permit #: \_\_\_\_\_

Dual Completion Permit #: \_\_\_\_\_

SWD Permit #: \_\_\_\_\_

EOR Permit #: \_\_\_\_\_

GSW Permit #: \_\_\_\_\_

Spud Date or Recompletion Date \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date or Recompletion Date \_\_\_\_\_

API No.: \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum:  NAD27  NAD83  WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls

Dewatering method used: \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

Confidentiality Requested

Date: \_\_\_\_\_

Confidential Release Date: \_\_\_\_\_

Wireline Log Received  Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to [kcc-well-logs@kcc.ks.gov](mailto:kcc-well-logs@kcc.ks.gov). Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

1. Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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**Northern Lights Oil Company, LLC**  
 Lease: **Desiree #2**  
 Field: **George South**  
 Location: **2,482' FSL & 2022' FEL**  
 SEC: **17** T1/2SP **9S** RGE **26W**  
 COUNTY: **Sheridan STATE Kansas**

CONTRACTOR: **Duke Drilling Rig #2**  
 SPID: **8-12-21** COMP: **8-19-21**  
 SAMPLES SAVED FROM: **3400 TO RTD**

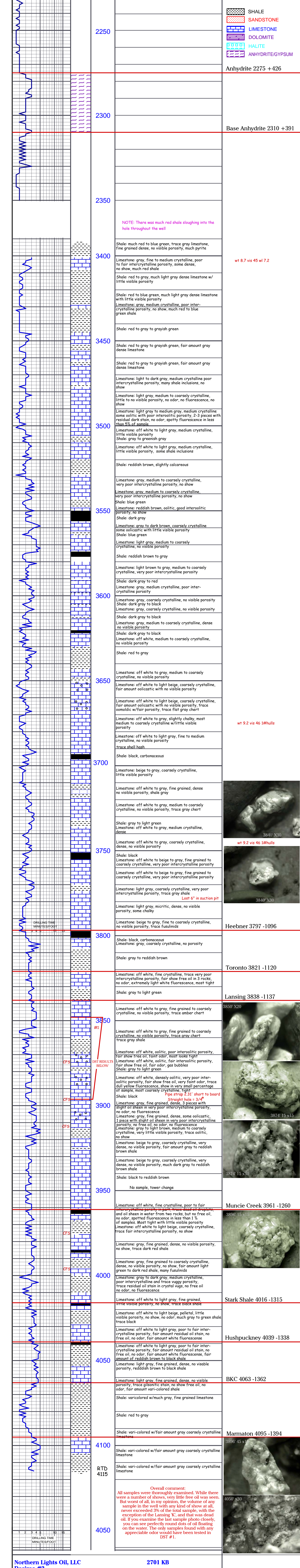
FORMATION: **SAMPLE** ELOG: **DATUM**

ELEVATION  
 K.B. **2701**  
 D.F. \_\_\_\_\_  
 G.L. **2693**

DEPTH MEASURED FROM KB  
 Log \_\_\_\_\_  
 Surface **8.50' / 307' W/2100X**  
 Production **NONE**  
 Elected Log **NO**  
 RAO generated from CN/AN/EL \_\_\_\_\_

A. ELOG	B. ELOG	C. DT
428	433	426
2272	2272	429
2310	2308	391
3735	3732	-1053
3797	3794	-1093
3821	3816	-1117
3838	3834	-1134
3861	3857	-1151
4018	4012	-1247
4039	4026	-1324
4061	4053	-1354
4115	4112	-1389
4115	4112	-1397

A. SE. NW. SE 17-9S-26W Northern Lights Desiree #1  
 B. NW. SW. NE 17-9S-26W Oxford Exp. Mills #1-72  
 C. SW. SW. W 17-9S-26W Mt. Brown Richards #1



**Northern Lights Oil, LLC**  
**Desiree #2**  
**2505' FSL & 2030' FEL 17-9S-R26W**  
**Sheridan County, Kansas**

**2701 KB**

**Comments:**

**GENERAL INFORMATION:**

Formation: **Upper Lansing**  
 Deviated: **No Whipstock**  
 Time Tool Opened: **16:33:57**  
 Time Test Ended: **21:31:07**

Interval: **3848.00 ft (KB) To 3896.00 ft (KB) (TVD)**  
 Total Depth: **3896.00 ft (KB) (TVD)**  
 Hole Diameter: **7.88 inches** Hole Condition: **Fair**

Test Type: **Conventional Bottom Hole (Initial)**  
 Tester: **Spencer J Staab**  
 Unit No: **84**

Reference Elevations: **2701.00 ft (KB)**  
**2693.00 ft (CF)**  
**8.00 ft**

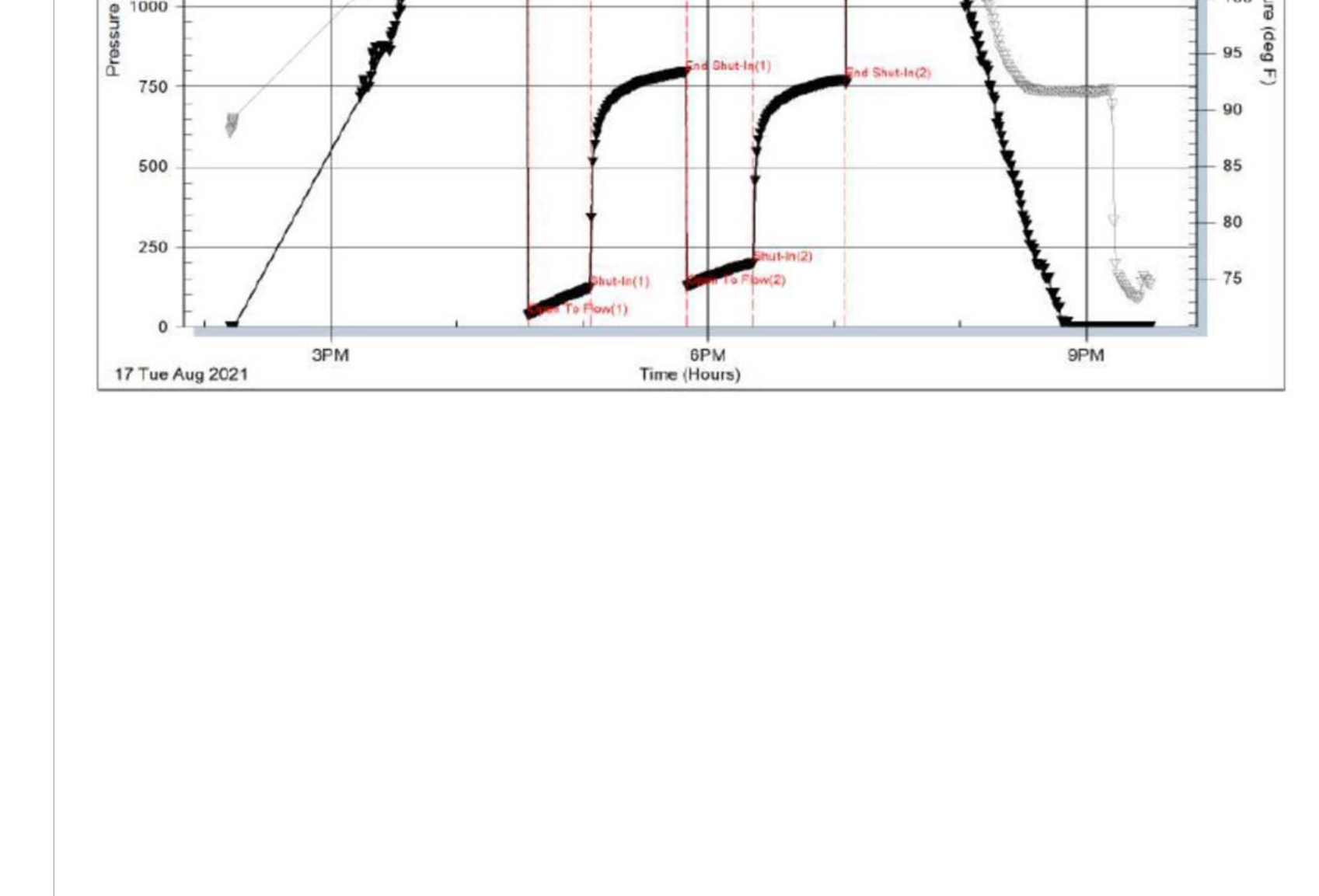
**TEST COMMENT:** 30-IF-BOB 13 mins Built to 21"  
 45-ISI-No Return  
 30-FF-BOB 20 mins Built to 16 1/2"  
 45-FSI-No Return

**RECOVERY**

Length (ft)	Description	Volume (bbl)
60.00	GSMCW 5%G 5%M 90%W	0.85
340.00	GHCW w/oil spots 5%G 40%M 55%W	4.82
70.00	GWCM w/trace oil 5%G 1%O 14%W 80%O	9.99
5.00	GMCO 10%G 10%M 80%O	0.07

**PRESSURE SUMMARY**

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1894.65	114.75	Initial Hydro-static
1	35.70	114.57	Open To Flow (1)
31	121.25	119.53	Shut-In(1)
76	794.40	122.55	End Shut-In(1)
77	125.71	122.35	Open To Flow (2)
109	199.99	123.32	Shut-In(2)
153	772.09	124.81	End Shut-In(2)
153	1878.72	124.55	Final Hydro-static



**Overall comment:**  
 All samples were thoroughly examined. While there were a number of shows, very little free oil was seen. But worst of all, in my opinion, the volume of any sample in the well with any kind of show at all, never exceeded 3% of the total sample, with the exception of the Lansing 'K', and that was dead oil. If you examine the last sample photo closely, you can see perfectly round dots of oil floating on the water. The only samples found with any appreciable odor would have been tested in DST #1.





**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

Northern Lights Oil Company LLC

17-9s-26w Sheridan KS

PO BOX 164  
Suite B  
Andover KS 67002+0164  
ATTN: Frank Mize

Desiree #2

Job Ticket: 66899

DST#: 1

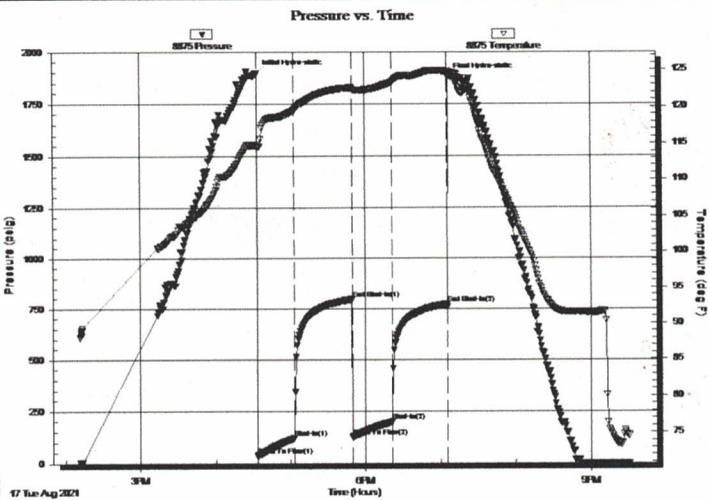
Test Start: 2021.08.17 @ 14:12:00

## GENERAL INFORMATION:

Formation: **Upper Lansing**  
 Deviated: **No Whipstock:** ft (KB)  
 Test Type: **Conventional Bottom Hole (Initial)**  
 Time Tool Opened: 16:33:57  
 Tester: **Spencer J Staab**  
 Time Test Ended: 21:31:07  
 Unit No: **84**  
 Interval: **3848.00 ft (KB) To 3896.00 ft (KB) (TVD)**  
 Reference Elevations: ft (KB)  
 Total Depth: **3896.00 ft (KB) (TVD)**  
 ft (CF)  
 Hole Diameter: **7.88 inches** Hole Condition: **Fair**  
 KB to GR/CF: ft

**Serial #: 8875** **Outside**  
 Press@RunDepth: 199.99 psig @ 3851.00 ft (KB) Capacity: psig  
 Start Date: 2021.08.17 End Date: 2021.08.17 Last Calib.: 2021.08.17  
 Start Time: 14:12:00 End Time: 21:31:07 Time On Btm: 2021.08.17 @ 16:33:17  
 Time Off Btm: 2021.08.17 @ 19:06:11

**TEST COMMENT:** 30-IF-BOB 13 mins Built to 21"  
 45-ISI-No Return  
 30-FF-BOB 20 mins Built to 16 1/2"  
 45-FSI-No Return



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1894.65	114.75	Initial Hydro-static
1	35.70	114.57	Open To Flow (1)
31	121.25	119.53	Shut-In(1)
76	794.40	122.55	End Shut-In(1)
77	125.71	122.35	Open To Flow (2)
109	199.99	123.32	Shut-In(2)
153	772.09	124.81	End Shut-In(2)
153	1878.72	124.55	Final Hydro-static

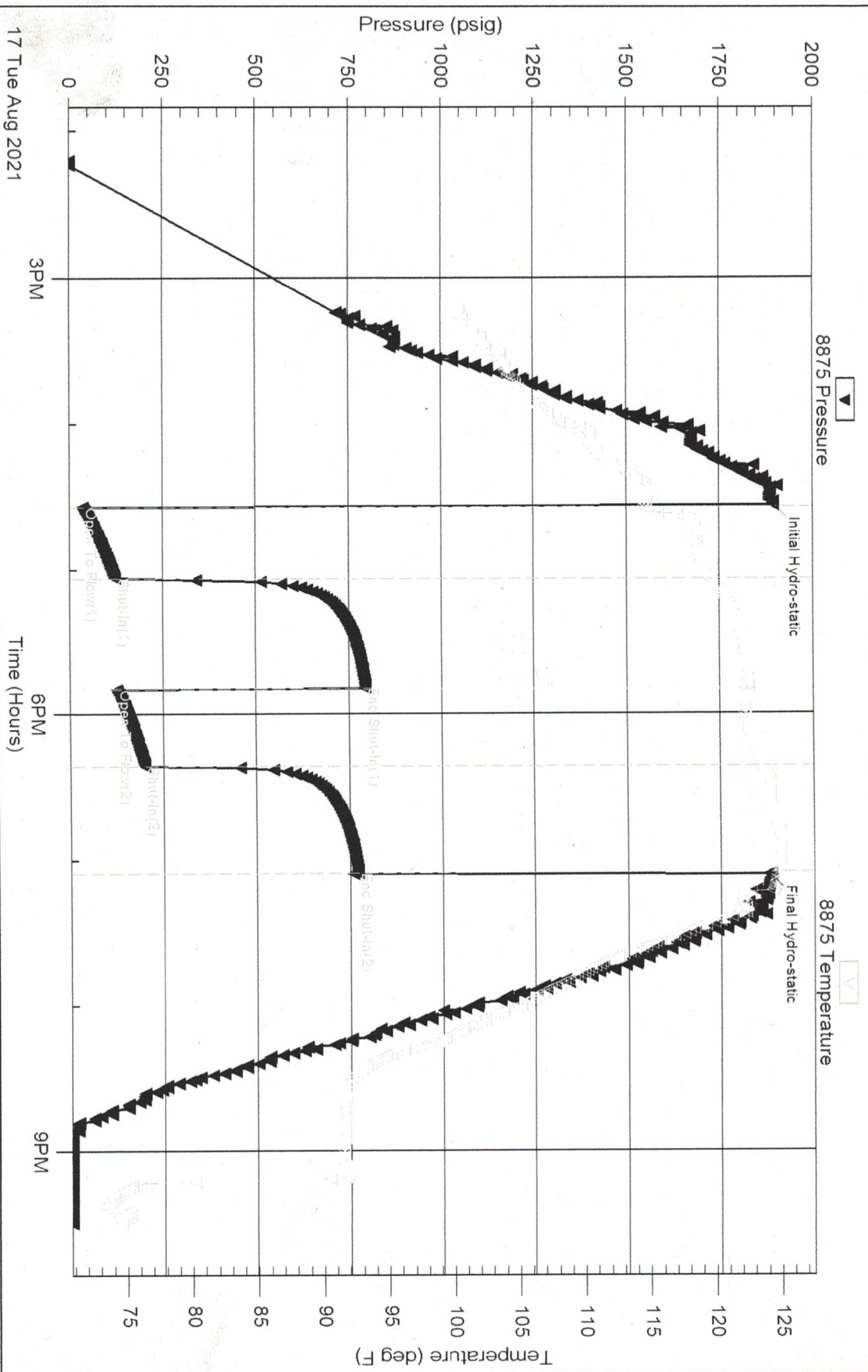
## Recovery

Length (ft)	Description	Volume (bbl)
60.00	GSMCW 5%G 5%M 90%W	0.85
340.00	GHMCW w/oil spots 5%G 40%M 55%W	4.82
70.00	GWCM w/trace oil 5%G 1%O 14%W 80%O.99	
5.00	GMCO 10%G 10%M 80%O	0.07

## Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

### Pressure vs. Time





# FRANKS Oilfield Service

Main Street Victoria, KS 67671 ♦ 24 Hour Phone (785) 639-7269  
 ce Phone (785) 639-3949 ♦ Email: franksoilfield@yahoo.com

TICKET NUMBER 0387  
 LOCATION Hoxie  
 FOREMAN Tom Williams

## FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY			
8-12-21	5474	Desiree #2	17	9	26	Sheridan			
CUSTOMER		TRUCK #		DRIVER		TRUCK #		DRIVER	
Northern Lights Oil Company LLC		101		Tom W					
Mailing Address		102		Jack T					
PO Box 164									
Suite B									
CITY	STATE	ZIP CODE							
Andover	KS	67002							

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 8 5/8" 23"  
 CASING DEPTH 307.57' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.8# SLURRY VOL 1.41 WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 17 Bbl DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting + Rig up on Duke #2 Circulate casing  
Mix 200 sacks class A 3% cell 2% gel displace with 17 Bbl.  
Cement did circulate shut in  
Plug down 10:45 PM.  
Leve 8 5/8" head + valve

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PL002	1	PUMP CHARGE	\$1150 <sup>00</sup>	\$1150 <sup>00</sup>
M001	15	MILEAGE	\$7.50	\$117 <sup>00</sup>
M003	9.4 tons	Ton Mileage delivered	\$600 <sup>00</sup>	\$5604 <sup>00</sup>
LB004	200 sq 3ba 2% gel	class A surface blend	\$24.50	\$4900 <sup>00</sup>
			subtotal	\$1767 <sup>00</sup>
			less 25% disc.	\$1325 <sup>25</sup>
			subtotal	\$5,075 <sup>25</sup>
			SALES TAX	312.38
			ESTIMATED TOTAL	5,387.63

AUTHORIZATION Dion Vasyuk TITLE IP DATE 8-12-21

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



# FRANKS Oilfield Service

◆ 815 Main Street Victoria, KS 67671 ◆ 24 Hour Phone (785) 639-7269  
 ◆ Office Phone (785) 639-3949 ◆ Email: franksoilfield@yahoo.com

TICKET NUMBER 0391  
 LOCATION Hoxie KS  
 FOREMAN Tom Williams

## FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
08-19-21	5474	Desiree #2	17	9	26	Speridian

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Northern Lights Oil Comp. LLC	101	Tom W		
	102	Jack T.		

MAILING ADDRESS	CITY	STATE	ZIP CODE
PO Box 164 suite B	Andover	KS	67002

JOB TYPE Rotary Plug HOLE SIZE \_\_\_\_\_ HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE 4.5" TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_  
 REMARKS: Safety meeting + Rig up on dake Plug as ordered.

1<sup>st</sup> 50 sk 2300'  
 2<sup>nd</sup> 100 sk 1425'  
 3<sup>rd</sup> 50 sk 350'  
 4<sup>th</sup> 10 sk 40'  
 5<sup>th</sup> 30 sk RH  
 6<sup>th</sup> 15 sk MH

Thanks Tom & Jack

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PL002	1	PUMP CHARGE	\$1150 <sup>00</sup>	\$1150 <sup>00</sup>
MO01	20	MILEAGE	\$6 <sup>50</sup>	\$130 <sup>00</sup>
MO02	11.35 tons	Ton Mileage delivery	\$400 <sup>00</sup>	\$4600 <sup>00</sup>
CB010	255 sk	60/40 4 bag 1/4" #10 seal	\$16 <sup>75</sup>	\$4271 <sup>25</sup>
FEC55	1	8 7/8" wooden plug	\$165 <sup>00</sup>	\$165 <sup>00</sup>
			sub total	\$4816 <sup>25</sup>
			less: 25% disc.	\$1579 <sup>06</sup>
			sub total	\$4737 <sup>19</sup>
			SALES TAX	282.81
			ESTIMATED TOTAL	5,020.00

AUTHORIZATION Deion Vasquez TITLE Tool pusher DATE 8-12-2021

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.