

Confidentiality Requested:

☒ Yes ☐ NoKANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

January 2018

Form must be Typed

Form must be Signed

All blanks must be Filled

CONFIDENTIAL**WELL COMPLETION FORM**
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 35162

Name: Dixon Operating Company, LLC

Address 1: 1625 N WATERFRONT PKWY STE 220

Address 2:

City: WICHITA State: KS Zip: 67206 + 6620

Contact Person: TJ Dixon

Phone: (316) 264-9632

CONTRACTOR: License # 5142

Name: Sterling Drilling Company

Wellsite Geologist: Blake Miller

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 #:

1/13/2025

1/21/2025

1/21/2025

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No.: 15-185-24168-00-00

Spot Description:

N2 - S2 - SE - NE Sec. 33 Twp. 22 S. R. 12 ☐ East ☒ West3070 Feet from ☐ North / ☒ South Line of Section660 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

GPS Location: Lat: (e.g. xx.xxxxxx), Long: (e.g. -xxx.xxxxxx)

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Stafford

Lease Name: KRANKENBERG Well #: 3

Field Name:

Producing Formation: NA

Elevation: Ground: 1838 Kelly Bushing: 1849

Total Vertical Depth: 3830 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 306 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: 29000 ppm Fluid volume: 1800 bbls

Dewatering method used: Evaporated

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: 04/15/2025

☐ Confidential Release Date: 04/15/2027☒ Wireline Log Received ☒ Drill Stem Tests Received☒ Geologist Report / Mud Logs Received☐ UIC DistributionALT ☒ I ☐ II ☐ III Approved by: Kelsey Cox Date: 04/16/2025