

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

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 36042
 Name: MW Oil, Inc
 Address 1: 3422 N BEACH CLUB CIR
 Address 2: _____
 City: WICHITA State: KS Zip: 67205 + 2532 _____
 Contact Person: Miles Wedel
 Phone: (316) 616-4175
 CONTRACTOR: License # 3004
 Name: Gressel Oilfield Service, LLC
 Wellsite Geologist: N/A
 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: MW Oil, IncWell Name: Loger C-3Original Comp. Date: 10/04/1985 Original Total Depth: 3900

☐ 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 #: _____

5/08/2025 5/23/2025
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No.: 15-173-20742-00-01Spot Description: 641 ACRE SECTIONNW NE SE NW Sec. 12 Twp. 29 S. R. 1 ☐ East ☒ West3630 Feet from ☐ North / ☒ South Line of Section2970 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SWGPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84County: SedgwickLease Name: LOGGER C Well #: 3

Field Name: _____

Producing Formation: ArbuckleElevation: Ground: 1289 Kelly Bushing: 1295Total Vertical Depth: 3900 Plug Back Total Depth: _____Amount of Surface Pipe Set and Cemented at: 208 FeetMultiple 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 DistributionALT ☒ I ☐ II ☐ III Approved by: Alexis Vincent Date: 06/27/2025

Operator Name: MW Oil, Inc Lease Name: LOGGER C Well #: 3
 Sec. 12 Twp. 29 S. R. 1 ☐ East ☒ West County: Sedgwick

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. 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 ☐ Yes ☒ No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey ☐ Yes ☒ No Cores Taken ☐ Yes ☒ No Electric Log Run ☐ Yes ☒ No Geologist Report / Mud Logs ☐ Yes ☒ No List All E. Logs Run:	☐ Log Formation (Top), Depth and Datum ☐ Sample <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>L/KC</td> <td>2734</td> <td>-1439</td> </tr> <tr> <td>B/KC</td> <td>2929</td> <td>-1634</td> </tr> <tr> <td>Miss</td> <td>3254</td> <td>-1959</td> </tr> <tr> <td>Arb</td> <td>3737</td> <td>-2452</td> </tr> </tbody> </table>	Name	Top	Datum	L/KC	2734	-1439	B/KC	2929	-1634	Miss	3254	-1959	Arb	3737	-2452
Name	Top	Datum														
L/KC	2734	-1439														
B/KC	2929	-1634														
Miss	3254	-1959														
Arb	3737	-2452														

CASING RECORD ☒ New ☐ 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
Surface	12.25	8.625	23	208	60/40	175	3%CC
Production	7.875	4.5	10.5	3751	50/50	175	18% salt

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: ☐ Perforate ☒ Protect Casing ☐ Plug Back TD ☐ Plug Off Zone	Depth Top Bottom 200-240 -	Type of Cement common	# Sacks Used 480	Type and Percent Additives

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: <u>6/26/2025</u>	Producing Method: ☐ Flowing ☐ Pumping ☐ Gas Lift ☒ Other <i>(Explain)</i> <u>Disposal</u>			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☒ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom 3751 3900
---	--	---

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: <u>2.375</u> Set At: <u>3745</u> Packer At: <u>3745</u>					

Form	ACO1 - Well Completion
Operator	MW Oil, Inc
Well Name	LOGGER C 3
Doc ID	1849687

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.625	23	208	60/40	175	3%CC
Production	7.875	4.5	10.5	3751	50/50	175	18% salt

COPELAND

Acid & Cement

BURRTON, KS GREAT BEND, KS
(620) 463-5161 (620) 793-3366
FAX (620) 463-2104 FAX (620) 793-3536

POST OFFICE BOX 438
HAYSVILLE, KS 67060
(316) 524-1225
(316) 524-1027 FAX

Invoice

Page: 1

INVOICE NUMBER:
C48596-IN

BILL TO:

MW OIL
3422 BEACH CLUB CIRC
WICHITA, KS 67205

LEASE: LOGER C-3 SWD

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
05/14/2025	48596		05/09/2025	LOGER C-3 SWD	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
47.00	MI	MILEAGE CEMENT PUMP TRUCK		0.00	6.00	282.00
1.00	EA	PUMP CHARGE FOR SQUEEZE JOB		0.00	1,000.00	1,000.00
300.00	SK	COMMON CEMENT		0.00	18.00	5,400.00
300.00	EA	BULK CHARGE		0.00	1.25	375.00
662.70	MI	BULK TRUCK - TON MILES		0.00	1.10	728.97
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COB		Net Invoice:		7,785.97
RECEIVED BY		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		SEDCO Sales Tax:		583.95
		NET 30 DAYS		Invoice Total:		<u>8,369.92</u>

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service
Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

COPELAND

Acid & Cement

BURRTON, KS ♦ GREAT BEND, KS
(620) 463-5161 (620) 793-3366
FAX (620) 463-2104 FAX (620) 793-3536

POST OFFICE BOX 438
HAYSVILLE, KS 67060
(316) 524-1225
(316) 524-1027 FAX

Invoice

Page: 1

INVOICE NUMBER:
C48599-IN

BILL TO:
MW OIL
3422 BEACH CLUB CIRC
WICHITA, KS 67205

LEASE: LOGER C-3 SWD

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
05/14/2025	48599		05/13/2025	LOGER C-3 SWD	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
47.00	MI	MILEAGE CEMENT PUMP TRUCK		0.00	6.00	282.00
1.00	EA	PUMP CHARGE FOR SQUEEZE JOB		0.00	1,000.00	1,000.00
180.00	SK	COMMON CEMENT		0.00	18.00	3,240.00
6.00	SK	CALCIUM CHLORIDE		0.00	42.00	252.00
180.00	EA	BULK CHARGE		0.00	1.25	225.00
397.62	MI	BULK TRUCK - TON MILES		0.00	1.10	437.38
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COB		Net Invoice:		5,436.38
		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		SEDCO Sales Tax:		407.73
RECEIVED BY _____		NET 30 DAYS		Invoice Total:		<u>5,844.11</u>

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.