

COPY

RELEASED
SIDE ONE

2710

31-16-21W

CONFIDENTIAL

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

NOV 13

API NO. 15-

135-23,495

FROM CONFIDENTIAL

Operator: License # 5474Name: Northern Lights Oil Co., L.P.Address P.O. Box 164City/State/Zip Andover, KS 67002Purchaser: ---Operator Contact Person: John W. Sutherland Jr.Phone (316) 733-1515Contractor: Name: Mallard JVLicense: 4958Wellsite Geologist: Kevin Howard

Designate Type of Completion

☐ New Well ☐ Re-Entry ☐ Workover☐ Oil ☐ SWD ☐ Temp. Abd.☐ Gas ☐ Inj ☐ Delayed Comp.☒ Dry ☐ Other (Core, Water Supply, etc.)

OWO: old well info as follows:

Operator: ---Well Name: ---Comp. Date --- Old Total Depth ---

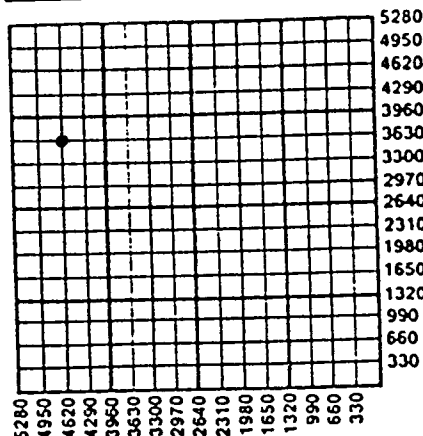
Drilling Method:

☒ Mud Rotary ☐ Air Rotary ☐ Cable

10-23-90 10-30-90 10-30-90
Spud Date Date Reached TD Completion Date

County NESS East --- West ---Sec. 31 Twp. 16S Rge. 21 ☒ East ☒ West

3630 Ft. North from Southeast Corner of Section

4620 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)Lease Name Thompson "B" Well # 3Field Name UnnamedProducing Formation ---Elevation: Ground 2348 KB 2356Total Depth 4381 PBTD ---Amount of Surface Pipe Set and Cemented at 260.15 FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ NoIf yes, show depth set --- FeetIf Alternate II completion, cement circulated from ---feet depth to --- w/ --- sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of all wireline logs and drillers time log shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-141 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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.

Signature

Title General PartnerDate 11-19-90Subscribed and sworn to before me this 19th day of November, 19 90.

Notary Public

Date Commission Expires 7-3-1993

K.C.C. OFFICE USE ONLY

F ☒ Letter of Confidentiality Attached
C ☒ Wireline Log Received
C ☐ Drillers Timelog Received

Distribution

☒ KCC ☐ SWD/Rep ☐ NGPA
☒ KGS ☐ Plug ☐ Other (Specify)



Form ACO-1 (7-89)

CONFIDENTIAL

SIDE TWO

Operator Name NORTHERN LIGHTS OIL CO., L. Base Name Thompson B Well # 3
☐ East
 Sec. 31 Twp. 16S Rge. 21 ☒ West
County Ness

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

 Drill Stem Tests Taken ☒ Yes ☐ No
 (Attach Additional Sheets.)

 Samples Sent to Geological Survey ☒ Yes ☐ No

 Cores Taken ☐ Yes ☒ No

 Electric Log Run ☒ Yes ☐ No
 (Submit Copy.)

 (4248-4261) Cherokee
 DST #1 20-0-0-0 Off Bottom 18'
 Rec. 30' Oil Spkd Mud, 60' Mud,
 180' Salt Water
 IFP:16-108 FFP-----
 ISIP----- FSIP-----

Formation Description

☒ Log ☐ Sample

Name	Top	Bottom
Anhydrite	1628	1665
Heebner	3747	
Lansing	3788	
BKC	4054	
Labette Sh	4230	
Cherokee	4252	
Eros. Miss	4340	
RTD	4380	
LTD	4381	

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 1/2	8 5/8	20	260.15	60/40 POZ	170	3%CC2%Gel

PERFORATION RECORD

Shots Per Foot Specify Footage of Each Interval Perforated

Acid, Fracture, Shot, Cement Squeeze Record
(Amount and Kind of Material Used) Depth

TUBING RECORD

Size

Set At

Packer At

Liner Run

☐ Yes ☐ No

Date of First Production

Producing Method

☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)Estimated Production
Per 24 Hours

Oil

Bbls.

Gas

Mcf

Water

Bbls.

Gas-Oil Ratio

Gravity

Disposition of Gas:

☐ Vented ☐ Sold ☐ Used on Lease
 (If vented, submit ACO-18.)

METHOD OF COMPLETION

☐ Open Hole ☐ Perforation ☐ Dually Completed ☐ Commingled
☐ Other (Specify) _____

Production Interval