

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5474
Name: NORTHERN LIGHTS OIL CO., LC
Address: P.O. Box 164
City/State/Zip: Andover, KS 67002
Purchaser: Eott
Operator Contact Person: Kurt Smith
Phone: (316) 733-1515
Contractor: Name: Mallard JV
License: 4958
Wellsite Geologist: Kurt Smith

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: _____
Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to Enhr./SWD

Plug Back _____ Plug Back Total Depth _____

Commingled _____ Docket No. 5-9-01

Dual Completion _____ Docket No. _____

Other (SWD or Enhr.?) _____ Docket No. _____

11-14-00

11-23-00

11-24-00

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No. 15 - 179-21104-0000

County: Sheridan

se ne-se Sec. 17 Twp. 9 S. R. 26 East West

1650 feet from S N (circle one) Line of Section

1650 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Desiree Well #: 1

Field Name: WC- unnamed

Producing Formation: LKC

Elevation: Ground: 2686 Kelly Bushing: 2691

Total Depth: 4076 ^{30 FT} ~~LKC~~ Plug Back Total Depth: --

Amount of Surface Pipe Set and Cemented at 272 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 2271 Feet

If Alternate II completion, cement circulated from 2271

feet depth to surface w/ 575 sx cmt.

Drilling Fluid Management Plan ALT 2 99H 01/09/03
(Data must be collected from the Reserve Pit)

Chloride content 2500 ppm Fluid volume 6000 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 9 2001

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of 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 geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

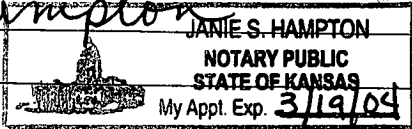
Signature: _____

Title: Exploration Mngr. Date: 5-8-01

Subscribed and sworn to before me this 8th day of May

Notary Public: Janie S Hampton

Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Northern Lights Oil Co. Lease Name: Desiree Well #: 1
 Sec. 17 Twp. 9 S. R. 26 East West County: Sheridan

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	2263	
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	LKC	3826	
		BKC	4048	
List All E. Logs Run:	RAG			

CASING RECORD <input type="checkbox"/> New <input checked="" 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	# Sacs Used	Type and Percent Additives
Surface	12 1/4	8 5/8	20#	272'	60/40 poz	175	3%cc, 2%g
Production	7 7/8	5 1/2	15.5	4079'	ASC	150	10%salt, 2%g

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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	3892-93	250gal MCA	3893
4	3852-54	1500 gal 15% NE	3854

TUBING RECORD Size 2 7/8 Set At 3940 Backer At _____ Liner Run Yes No

Date of First, Resumerd Production, SWD or Enhr. 2-1-01 Producing Method Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil <u>35</u> Bbls.	Gas <u>200</u> Mcf	Water <u>200</u> Bbls.	Gas-Oil Ratio	Gravity <u>35°</u>
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Disposition of Gas **METHOD OF COMPLETION** Production Interval 3852'-3854'
3892'-3893'

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.) Other (Specify) _____



15-179-21104-0000

RECEIVED
KANSAS CORPORATION COMMISSION

Kansas Corporation Commission

MAY 9 2001

Bill Graves, Governor John Wine, Chair Cynthia L. Claus, Commissioner Brian J. Moline, Commissioner
CONSERVATION DIVISION

March 2, 2001

COPY

Kurt L. Smith
Northern Lights Oil Company Inc.
P O Box 164
Andover, Kansas 67002

RE: Alternate II Extension
15-179-211010000
Desiree #1
S17 - T9S - R26W
Sheridan County

Dear Mr. Smith::

This letter is written to inform you that you have been granted a 60 day(s) extension of time to complete Alternate II cementing on the above-described well.

Your original 120 days for completion expires March 14, 2001. Thus, this extension will expire on May 14, 2001. I urge you to make every effort to complete the cementing within this time frame. Extension of this time frame, pursuant to K.A.R. 82-3-106, automatically extends the time period for filing the ACO-1, pursuant to K.A.R. 82-3-130. Before completing the cementing of this well, please contact the Hays District Office at 785-625-0550.

If you have any questions in this regard, please do not hesitate to contact me.

Sincerely,

M. L. Korphage
Director

MLK:nao

cc: Dave Williams
Herb Deines
Jeff Klock
File

ORIGINAL ALLIED CEMENTING CO., INC.

5365

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SURFACE

SERVICE POINT:

DAKLEY

DATE <u>11-16-00</u>	SEC. <u>17</u>	TWP. <u>9S</u>	RANGE <u>26W</u>	CALLED OUT	ON LOCATION <u>9:45</u>	JOB START <u>11:30 PM</u>	JOB FINISH <u>12:00 AM</u>
LEASE <u>DEERE</u>	WELL # <u>2</u>	LOCATION <u>QUARTER 13N-1/2W-1/2N-</u>			COUNTY <u>SHERIDAN</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR MALLARD DRILLING

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4" T.D. 272'

CASING SIZE 8 5/8" DEPTH 272'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 16 1/4 BBL.

OWNER JAMIE

CEMENT AMOUNT ORDERED 175 SKS 60/100 238.00 28.66L

COMMON	<u>105</u>	<u>SKS</u>	@	<u>7.55</u>	<u>792.75</u>
POZMIX	<u>20</u>	<u>SKS</u>	@	<u>3.25</u>	<u>227.50</u>
GEL	<u>3</u>	<u>SKS</u>	@	<u>9.50</u>	<u>28.50</u>
CHLORIDE	<u>5</u>	<u>SKS</u>	@	<u>28.00</u>	<u>140.00</u>
			@		
			@		
			@		
			@		
			@		
HANDLING	<u>178</u>	<u>SKS</u>	@	<u>1.05</u>	<u>186.90</u>
MILEAGE	<u>4¢</u>	<u>per sk/mile</u>			<u>249.20</u>
TOTAL					<u>1,624.85</u>

EQUIPMENT

PUMP TRUCK CEMENTER TERRY

300 HELPER WAYNE

BULK TRUCK

218 DRIVER DAVID

BULK TRUCK

_____ DRIVER _____

REMARKS:

SERVICE

CEMENT IN CELLAR

THANK YOU

DEPTH OF JOB	<u>272'</u>	
PUMP TRUCK CHARGE		<u>490.00</u>
EXTRA FOOTAGE	@	
MILEAGE	<u>35 miles</u>	@ <u>3.00</u> <u>105.00</u>
PLUG	<u>8 5/8 SURFACE</u>	@ <u>45.00</u>
	@	
	@	
TOTAL		<u>620.00</u>

CHARGE TO: NORTHERN LIGHTS OIL CO.

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

@	
@	
@	
@	
@	
TOTAL	

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE LAWAN R. URBAN

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

LAWAN R. URBAN
PRINTED NAME

ORIGINAL ALLIED CEMENTING CO., INC. 5321

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

PROD - Lower

SERVICE POINT: Oakley

DATE <u>11-24-00</u>	SEC. <u>17</u>	TWP. <u>9S</u>	RANGE <u>26W</u>	CALLED OUT	ON LOCATION <u>12:45 AM</u>	JOB START	JOB FINISH <u>5:30 AM</u>
LEASE <u>Desiree</u>	WELL# <u>1</u>	LOCATION <u>Quarter 13N-1/2W-1/4N</u>			COUNTY <u>Sheridan</u>	STATE <u>Kan</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Mallard Dr Co #

TYPE OF JOB Production Springs

HOLE SIZE 7 7/8 T.D. 4080'

CASING SIZE 5 1/2 DEPTH 4078'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL Part Collar DEPTH 2271'

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 26.08

CEMENT LEFT IN CSG. 26.08

PERFS. _____

DISPLACEMENT _____

OWNER Same

CEMENT AMOUNT ORDERED 150 sks ASC, 10% Salt
2% Gel, 500 gal WFR-2

COMMON	_____	@	_____	_____
POZMIX	_____	@	_____	_____
GEL	<u>3 sks</u>	@	<u>9.50</u>	<u>28.50</u>
CHLORIDE	_____	@	_____	_____
ASC	<u>150 sks</u>	@	<u>9.05</u>	<u>1,357.50</u>
Salt	<u>14 sks</u>	@	<u>7.00</u>	<u>98.00</u>
WFR-2	<u>500 gal</u>	@	<u>1.00</u>	<u>500.00</u>
_____	_____	@	_____	_____
_____	_____	@	_____	_____
HANDLING	<u>125 sks</u>	@	<u>1.05</u>	<u>183.75</u>
MILEAGE	<u>4¢ per sk/mile</u>	_____	_____	<u>245.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Walt

300 HELPER Wayne

BULK TRUCK

218 DRIVER Andrew

BULK TRUCK

_____ DRIVER _____

TOTAL 2,412.75

REMARKS:

SERVICE

Cement 15 sks
" m.h. w/ 10 sks
Casing on bottom Circ 20 min
Pump 500gal WFR-2, Followed w/
125 sks ASC, Displace 100 BBL water
behind Plug, Landed 7 1000'
Float Held

DEPTH OF JOB	_____	_____	_____
PUMP TRUCK CHARGE	_____	_____	<u>1,080.00</u>
EXTRA FOOTAGE	_____	@	_____
MILEAGE	<u>35- miles</u>	@	<u>3.00</u>
PLUG	<u>5 1/2 Rubber</u>	@	<u>50.00</u>
_____	_____	@	_____
_____	_____	@	_____

TOTAL 1,235.00

CHARGE TO: Northern Lights

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____	_____	@	_____	_____
<u>1- Guide Shoe</u>	_____	@	_____	<u>150.00</u>
<u>1- AFD Inset</u>	_____	@	_____	<u>235.00</u>
<u>7- Centralizers</u>	_____	@	<u>50.00</u>	<u>350.00</u>
<u>1- Basket</u>	_____	@	_____	<u>128.00</u>
<u>1- Part Collar</u>	_____	@	_____	<u>1,750.00</u>

TOTAL 2,613.00

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Dale P. Jewett

DALE P. JEWETT
PRINTED NAME

ORIGINAL ORIGINAL

ALLIED CEMENTING CO., INC.

6992

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

ALT II Fill BACKSIDE

SERVICE POINT:

Oakley

DATE <u>4-28-01</u>	SEC <u>17</u>	TWP. <u>9s</u>	RANGE <u>26w</u>	CALLED OUT	ON LOCATION	JOB START <u>9:40 AM</u>	JOB FINISH <u>10:00 AM</u>
LEASE <u>Desiter</u>	WELL # <u>1</u>	LOCATION <u>Graffield 10 N 10 1/2 E 24 E</u>		COUNTY <u>Graham</u>	STATE <u>KS</u>		
<input checked="" type="radio"/> OLD OR <input type="radio"/> NEW (Circle one)							

CONTRACTOR _____ OWNER Same

TYPE OF JOB Pump Cement down Back side

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

CEMENT		AMOUNT ORDERED		
COMMON	<u>60 SKS</u>	@ <u>7.55</u>	<u>453.00</u>	
POZMIX	<u>40 SKS</u>	@ <u>3.25</u>	<u>130.00</u>	
GEL	<u>5 SKS</u>	@ <u>9.50</u>	<u>47.50</u>	
CHLORIDE		@		
	<u>Flo-Seal 25#</u>	@ <u>1.40</u>	<u>35.00</u>	
		@		
		@		
		@		
		@		
HANDLING	<u>106 SKS</u>	@ <u>1.05</u>	<u>111.30</u>	
MILEAGE	<u>4¢ per sk/mile</u>		<u>148.40</u>	
			TOTAL	<u>925.20</u>

EQUIPMENT

PUMP TRUCK CEMENTER Dean

191 HELPER Terry

BULK TRUCK

218 DRIVER Fuzzy

BULK TRUCK

_____ DRIVER _____

REMARKS:

Pressured 5 1/2 csg to 700'
pumped 100 sk cement down
Back side 5 1/2 csg no pressure

SERVICE

DEPTH OF JOB	_____		
PUMP TRUCK CHARGE			<u>4.50.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>35 miles</u>	@ <u>3.00</u>	<u>105.00</u>
PLUG		@	
		@	
		@	
			TOTAL <u>555.00</u>

CHARGE TO: Northern Lights oil co

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
			TOTAL _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Sam Bellevue

PRINTED NAME

ORIGINAL

ALLIED CEMENTING CO., INC.

6367

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

ALT II - Port Collar

SERVICE POINT: R

DATE <u>4-25-01</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>9:30 am</u>	JOB START	JOB FINISH <u>9:30 am</u>
LEASE <u>Deegee</u>	WELL # <u>F</u>	LOCATION <u>Quinlan 15N 12W N5.</u>			COUNTY <u>Wichita</u>	STATE <u>Ks</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)							

CONTRACTOR Western OWNER _____

TYPE OF JOB Tap Stage

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE 2 1/2 DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL Expert DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

CEMENT

AMOUNT ORDERED 400 6 3/4 6% gel 1/4 lb ft
75 com 3% cc
25 sand and 50 com

COMMON	<u>290</u>	@	<u>7.55</u>	<u>2189.50</u>
POZMIX	<u>160</u>	@	<u>3.25</u>	<u>520.00</u>
GEL	<u>20</u>	@	<u>9.50</u>	<u>190.00</u>
CHLORIDE	<u>2</u>	@	<u>28.00</u>	<u>56.00</u>
<u>Sand</u>	<u>2</u>	@	<u>5.60</u>	<u>11.20</u>
<u>Floesol</u>	<u>100</u>	@	<u>1.40</u>	<u>140.00</u>
		@		
		@		
		@		
HANDLING	<u>498</u>	@	<u>1.05</u>	<u>522.90</u>
MILEAGE	<u>441.5</u>	@	<u>2.25/mile</u>	<u>996.38</u>

TOTAL 4625.60

EQUIPMENT

PUMP TRUCK # 345 CEMENTER Mark
HELPER Dave

BULK TRUCK # 271 DRIVER Shane

BULK TRUCK # NC DRIVER Jim

REMARKS:

Either could not pump into or
could not open tool - decided to perf
Shot 2 joints above port collar
could not pump into - shot @ 2100
could not pump into - shot @ 1960
took note of 3 1/2 bbl/min @ 800' -
mixed 400 lbs of 50 com 3% cc - squeezed
to 1200' washed tool clean - pulled 2 1/2
shots in @ 500'

SERVICE

DEPTH OF JOB	_____		
PUMP TRUCK CHARGE	_____		<u>580.00</u>
EXTRA FOOTAGE	_____	@	
MILEAGE	<u>50</u>	@	<u>3.00</u>
PLUG	_____	@	
		@	
		@	

TOTAL 730.00

CHARGE TO: Northern Freight

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE _____

PRINTED NAME _____