

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009
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 # 5474
Name: Northern Lights Oil Co., L.C.
Address 1: 320 W. Central
Address 2: _____
City: Andover State: KS Zip: 67002
Contact Person: Robert Sutherland
Phone: (316) 305-0493
CONTRACTOR: License # 4958
Name: Mallard JV, Inc.
Wellsite Geologist: Bill Shepherd
Purchaser: NCRA

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bod 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 ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

7-25-11	7-31-11	8-1-11
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 185-23692 • 00 • 00
Spot Description: The North Half of the Northwest of the Southeast Quarter
N/2 NW SE Sec. 2 Twp. 24 S. R. 15 East West
2,310 Feet from North / South Line of Section
1,980 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Stafford
Lease Name: Munz Well #: 2
Field Name: Macksville
Producing Formation: Viola
Elevation: Ground: 2001' Kelly Bushing: 2006'
Total Depth: 4180 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 300' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 971' Feet
If Alternate II completion, cement circulated from: 971'
feet depth to: Surface w/ 260 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 71,000 ppm Fluid volume: 300 bbls
Dewatering method used: Haul to disposal
Location of fluid disposal if hauled offsite: _____
Operator Name: Bob's Hauling Service
Lease Name: Waters 1 License #: 33779
Quarter NW/4 Sec. 30 Twp. 24 S. R. 14 East West
County: Stafford Permit #: D24863

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.

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.

Signature: _____
Title: Exploration Geologist Date: 11-6-11

KCC Office Use ONLY

Letter of Confidentiality Received
Date: 11/4/11 - 11/4/13
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: DLG Date: 11-22-11

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NOV 04 2011
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NOV 04 2013
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KCC WICHITA