



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

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

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

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

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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: _____ 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

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1094743

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input 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	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

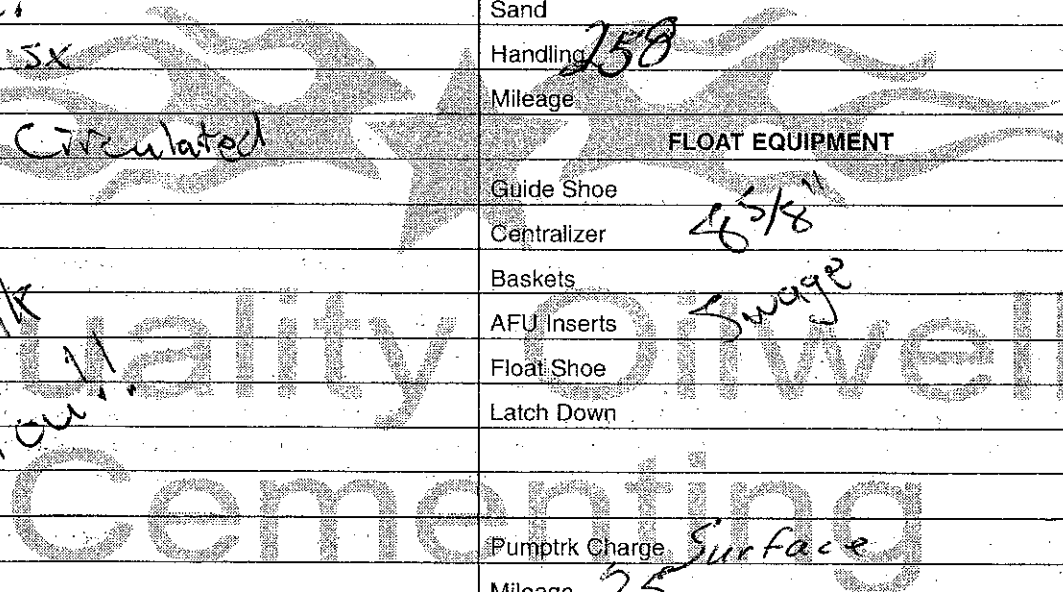
Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 245

Date	2/29/12	Sec.	35	Twp.	19	Range	10	County	Rice	State	OKS	On Location		Finish	9:45 AM	
Lease	Ludwick	Well No.	1	Location Ellenwood, E to SPR, N, 1/2 E, S into												
Contractor	Southwind Rig #1							Owner								
Type Job	Surface							To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.								
Hole Size	12 1/4"			T.D.	216'			Charge To Castle Resources, Inc.								
Csg.	RSS 11"			Depth	214'			Street								
Tbg. Size				Depth				City								
Tool				Depth				State								
Cement Left in Csg.	15'			Shoe Joint				The above was done to satisfaction and supervision of owner agent or contractor.								
Meas Line				Displace	12 3/4 Bbls.			Cement Amount Ordered 250 sk Com 5% CC 2% gel								
EQUIPMENT																
Pumptrk	9	No.	Cementer Helper	Paul												
Bulktrk	10	No.	Driver	Matt												
Bulktrk	PV	No.	Driver	Dony												
JOB SERVICES & REMARKS																
Remarks:								1/2# Floacle								
Rat Hole								Common 150								
Mouse Hole								Poz. Mix								
Centralizers								Gel. 3								
Baskets								Calcium 5								
D/V or Port Collar								Hulls								
Est. Circ.								Salt								
Mix 150 sk								Flowseal 62#								
Displace								Kol-Seal								
Cement Circulated								Mud CLR 48								
								CFL-117 or CD110 CAF 38								
								Sand								
								Handling 250								
								Mileage								
FLOAT EQUIPMENT																
								Guide Shoe								
								Centralizer 4 5/8"								
								Baskets								
								AFU Inserts Swage								
								Float Shoe								
								Latch Down								
								Pumptrk Charge Surface								
								Mileage 25								
								Tax								
								Discount								
								Total Charge								
X Signature	[Signature]															

Thank You!



JOB LOG

SWIFT Services, Inc.

DATE 5 MAR 12 PAGE NO.

CUSTOMER CASTLE RESOURCES.

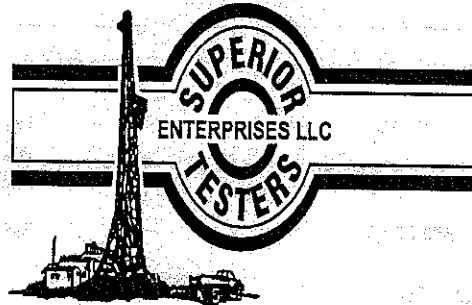
WELL NO.

LEASE LUDWICK #1

JOB TYPE 5 1/2 LONGSTRING

TICKET NO. 222064

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1330							ON LOCATION
	1500							START PIPE 5 1/2 - 7 1/2 SP RTD @ SET @ SHOBT. 15.00 CENTRALIZERS 1, 3, 5, 40 BASKETS. 5, 40
	1700							DROP BALL CIRCULATE
	1740	6	12		✓		300	Pump 500 gal MUD FLUSH
		6	20		✓		300	Pump 20 BBL KEL FLUSH
	1746							PLUG RH-MH (30sx-20sx)
	1750	6	152		✓			MIX CEMENT
			18		✓			MIX 275 sx SMD @ 11.2ppg MIX 75 sx SMD @ 15.0ppg
	1823							WASH OUT PUMPING LINES
	1825	6			✓			START DISPLACEMENT
	1840		80 1/2		✓		1500	PLUG DOWN PSI UP LATCH PLUG IN
	1843							RELEASE PRESSURE - DRY
	1846							WASH TRUCK
	1910							JOB COMPLETE
								THANKS # 110
								JASON JEFF DOWG



DRILL STEM TEST REPORT

Prepared For: **Castle Resources Inc.**

Box 87
Schoenchen, Kansas 67667-0087

ATTN: Jerry Green

Ludwick #1

35-19s-10w Rice County

Start Date: 2012.03.04 @ 00:00:00

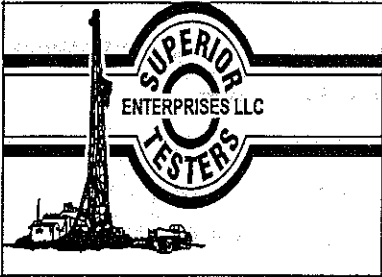
End Date: 2012.03.04 @ 00:00:00

Job Ticket #: 15866 DST #: 1

Superior Testers Enterprises LLC
PO Box 138 Great Bend KS 67530
1-800-792-6902

Printed: 2012.03.05 @ 10:37:39

Castle Resources Inc. 35-19s-10w Rice County Ludwick #1 DST # 1 Arbuckle 2012.03.04



DRILL STEM TEST REPORT

Castle Resources Inc.
 Box 87
 Schoenchen, Kansas 67667-0087
 ATTN: Jerry Green

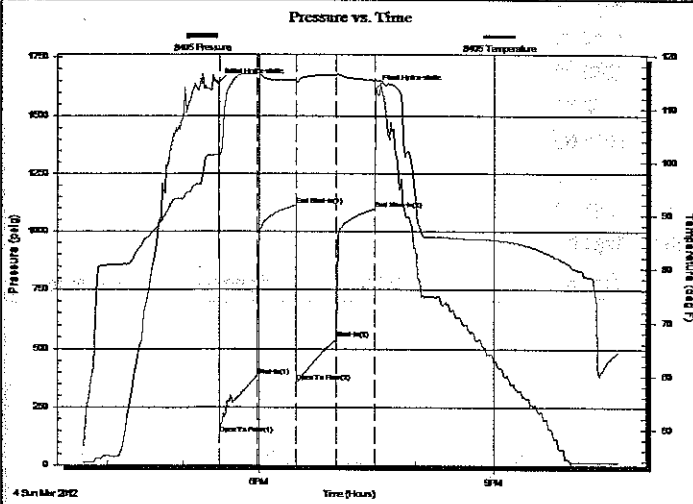
35-19s-10w Rice County
Ludwick #11
 Job Ticket: 15866 **DST#: 1**
 Test Start: 2012.03.04 @ 00:00:00

GENERAL INFORMATION:

Formation: **Arbuckle**
 Deviated: **No** Whipstock: **ft (KB)**
 Time Tool Opened: 00:00:00
 Time Test Ended: 00:00:00
 Test Type: **Conventional Bottom Hole (Initial)**
 Tester: **Gene Budig**
 Unit No: **3335**
 Interval: **3237.00 ft (KB) To 3288.00 ft (KB) (TVD)**
 Total Depth: **3288.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: **Fair**
 Reference Elevations: **1753.00 ft (KB)**
1745.00 ft (CF)
 KB to GR/CF: **8.00 ft**

Serial #: 8405 **Outside**
 Press@RunDepth: **1095.80 psig @ 3284.60 ft (KB)** Capacity: **5000.00 psig**
 Start Date: **2012.03.04** End Date: **2012.03.04** Last Calib.: **2012.03.04**
 Start Time: **15:41:08** End Time: **22:39:08** Time On Btm: **2012.03.04 @ 17:27:38**
 Time Off Btm: **2012.03.04 @ 19:29:38**

TEST COMMENT: 1st Opening 30 Minutes-Good Blow built to the bottom of a 5 gallon bucket in 4 minutes
 1st Shut-In 30 Minutes-Weak blow through out
 2nd Opening 30 Minutes-Good blow built to the bottom of a 5 Gallon bucket in 3 minutes
 2nd Shut-In 30 Minutes-Weak blow through out



PRESSURE SUMMARY

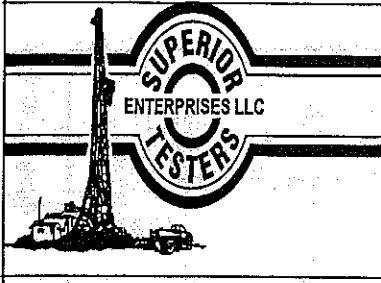
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1640.70	101.45	Initial Hydro-static
1	133.31	101.10	Open To Flow (1)
31	382.71	116.47	Shut-In(1)
61	1113.86	115.39	End Shut-In(1)
61	356.78	115.10	Open To Flow (2)
92	541.14	116.28	Shut-In(2)
122	1095.80	115.24	End Shut-In(2)
122	1615.29	115.36	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1375.00	Clean Gassy Oil Gravity 42 Corrected	19.29
0.00	300 Feet of gas in the pipe	0.00

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



DRILL STEM TEST REPORT

FLUID SUMMARY

Castle Resources Inc.
Box 87
Schoenchen, Kansas 67667-0087
ATTN: Jerry Green

35-19s-10w Rice County
Ludwick #11
Job Ticket: 15866 DST#: 1
Test Start: 2012.03.04 @ 00:00:00

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 48.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.19 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 4000.00 ppm			
Filter Cake: 1.00 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
1375.00	Clean Gassy Oil Gravity 42 Corrected	19.288
0.00	300 Feet of gas in the pipe	0.000

Total Length: 1375.00 ft Total Volume: 19.288 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:

Serial #: 8405 Outside Castle Resources Inc.

Ludwick #11

DST Test Number: 1

