



**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: \_\_\_\_\_



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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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 <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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# ALLIED OIL & GAS SERVICES, LLC 056587

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:  
Russell, KS

DATE <u>11-29-12</u>	SEC. <u>11</u>	TWP. <u>18</u>	RANGE <u>8</u>	CALLED OUT	ON LOCATION	JOB START <u>1:30 pm</u>	JOB FINISH <u>2:00 pm</u>
LEASE <u>Ross</u>	WELL # <u>1</u>	LOCATION <u>Ganesco W to Hwy 14 1/2 S</u>			COUNTY <u>Rice</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>		IF STATE <u>1E S10</u>					

CONTRACTOR White Knight OWNER \_\_\_\_\_  
 TYPE OF JOB Long string  
 HOLE SIZE 7 7/8 T.D. 3378  
 CASING SIZE 5 1/2 14" DEPTH 3371.75  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT 20.47  
 CEMENT LEFT IN CSG. 20.47  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT 8 1/4 bbl

EQUIPMENT  
 PUMP TRUCK CEMENTER Robert Y  
 # 417 HELPER Woody O  
 BULK TRUCK  
 # 410 DRIVER Walter K  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

CEMENT	
AMOUNT ORDERED	<u>180 ASC 5 1/4 gal/sk 3/4 fluid Mud flush</u>
COMMON	@ _____
POZMIX	@ _____
GEL	@ _____
CHLORIDE	@ _____
ASC	<u>180 @ 20.90 3762.00</u>
<u>Gilsonite</u>	<u>18.90 @ 0.98 882.00</u>
<u>DeGramer</u>	<u>25.00 @ 9.80 245.00</u>
<u>SI-10</u>	<u>50 @ 18.25 912.50</u>
<u>Mud flush</u>	<u>12.60 @ 58.70 744.40</u>
HANDLING	<u>232.41 @ 2.48 576.38</u>
MILEAGE	<u>622.04 @ 2.60 1617.32</u>
TOTAL	<u>8699.60</u>

**REMARKS:**

ran 85 ft of 5 1/2 14" new and old csg received circulation dropped ball circulated total 45 min mixed 500 gal mud flush mid 30 sks in bath hole and 180 sks ASC blend down hole displaced 8 1/4 bbl of water to land plug at 1800' released and Defed up quickly

Thank you!

**SERVICE**

DEPTH OF JOB	<u>3371.75</u>
PUMP TRUCK CHARGE	<u>2558.75</u>
EXTRA FOOTAGE	@ _____
MILEAGE <u>61 HUNT</u>	@ <u>7.70 469.70</u>
MANIFOLD	@ _____
<u>61 HUNT</u>	@ <u>4.40 268.40</u>
TOTAL	<u>3296.85</u>

CHARGE TO: Castle Resources  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

<u>latch down</u>	<u>1</u>	<u>324.09</u>	<u>324.09</u>
<u>basket</u>	<u>1</u>	@ <u>394.29</u>	<u>394.29</u>
<u>centralizer</u>	<u>4</u>	@ <u>57.33</u>	<u>229.32</u>
<u>float shoe</u>	<u>1</u>	@ <u>475.02</u>	<u>475.02</u>
TOTAL			<u>1422.72</u>

To: Allied Oil & Gas Services, LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Jeff Crawford  
 SIGNATURE Jeff Crawford

SALES TAX (if Any) 578.78  
 TOTAL CHARGES 13419.17  
 DISCOUNT 3180.34 IF PAID IN 30 DAYS  
Net 10238.83  
11/30  
11/30

# QUALITY WELL SERVICE, INC.

5736

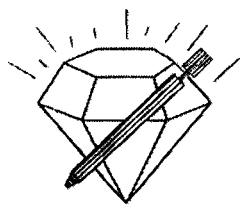
Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410  
Office / Fax 620-672-3663

Rich's Cell 620-727-3409  
Brady's Cell 620-727-6964

Date	10-24-12	Sec.	11	Twp.	18	Range	8	County	Rice	State	KS	On Location		Finish	7:30-8:00pm
Lease	ROSS	Well No.	1		Location Greenoak, KS 1 1/2 S W into										
Contractor	Precision Drilling				Owner To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.										
Type Job	Surface				Charge To Castle Resource's										
Hole Size	12 1/4		T.D.		332										
Csg.	8 5/8		Depth		322										
Tbg. Size			Depth		Street										
Tool			Depth		City State										
Cement Left in Csg.	15 ft		Shoe Joint		The above was done to satisfaction and supervision of owner agent or contractor.										
Meas Line			Displace		19.5 Cement Amount Ordered 225 sx com 3% ll 2% gel										
<b>EQUIPMENT</b>															
Pumptrk	No.	8		Cody		Common 225									
Bulktrk	No.	10		m.ke		Poz. Mix									
Bulktrk	No.					Gel. 4									
Pickup	No.					Calcium 8									
<b>JOB SERVICES &amp; REMARKS</b>															
Rat Hole	Hulls														
Mouse Hole	Salt														
Centralizers	Flowseal														
Baskets	Kol-Seal														
D/V or Port Collar	Mud CLR 48														
	CFL-117 or CD110 CAF 38														
	Sand														
	Handling 237														
	Mileage 40														
	<b>FLOAT EQUIPMENT</b>														
	Guide Shoe														
	Centralizer														
	Baskets														
	AFU Inserts														
	Float Shoe														
	Latch Down														
	Pumptrk Charge Surface														
	Mileage 40														
Thank You!														Tax	
														Discount	
														Total Charge	
X Signature															



# DIAMOND TESTING

P.O. Box 157

**HOISINGTON, KANSAS 67544**

(620) 653-7550 • (800) 542-7313

ROSS1DST1

Company Castle Resources, Inc. Lease & Well No. Ross No. 1  
 Elevation 1770 KB Formation Arbuckle Effective Pay \_\_\_\_\_ Ft. Ticket No. T127  
 Date 11-28-12 Sec. 11 Twp. 18S Range 8W County Rice State Kansas  
 Test Approved By Jerry D. Green Diamond Representative \_\_\_\_\_ Tim Venters

Formation Test No. 1 Interval Tested from 3,262 ft. to 3,272 ft. Total Depth 3,378 ft.  
 Packer Depth 3,257 ft. Size 6 3/4 in. Packer Depth 3,272 ft. Size 6 3/4 in.  
 Packer Depth 3,262 ft. Size 6 3/4 in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.  
 Depth of Selective Zone Set 3,272 ft.

Top Recorder Depth (Inside) 3,243 ft. Recorder Number 8457 Cap. 10,000 psi.  
 Bottom Recorder Depth (Outside) 3,269 ft. Recorder Number 11029 Cap. 5,025 psi.  
 Below Straddle Recorder Depth 3,375 ft. Recorder Number 11030 Cap. 5,025 psi.

Drilling Contractor White Knight Drilling, LLC - Rig 1 Drill Collar Length \_\_\_\_\_ ft. I.D. \_\_\_\_\_ in.  
 Mud Type Chemical Viscosity 50 Weight Pipe Length \_\_\_\_\_ ft. I.D. \_\_\_\_\_ in.  
 Weight 9.4 Water Loss 9.6 cc. Drill Pipe Length 3,229 ft. I.D. 3 1/2 in.  
 Chlorides 5,000 P.P.M. Test Tool Length 33 ft. Tool Size 3 1/2-IF in.  
 Make Sterling Serial Number 4 Anchor Length 10 ft. Size 4 1/2-FH in.  
 Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.  
 Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: Weak, 1/4 in. blow increasing. Off bottom of bucket in 17 mins. Weak, 2 in. blow back during shut-in.

2nd Open: Weak, surface blow increasing. Off bottom of bucket in 15 mins. Weak, surface blow back during shut-in.

Recovered 930 ft. of gas in pipe  
 Recovered 85 ft. of gassy oil = 1.209550 bbls. (Grind out: 3%-gas; 97%-oil) Gravity: 40  
 Recovered 40 ft. of gassy, heavy oil & water cut mud = .569200 bbls. (Grind out: 4%-gas; 35%-oil; 20%-water; 41%-mud) Chlorides: 16,000 Ppm PH: 7.0 RW: .57 @ 61°  
 Recovered 125 ft. of TOTAL FLUID = 1.778750 bbls.  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Remarks Tool Sample Grind Out: 43%-oil; 14%-water; 43%-mud

Bottom Recorder Pressure: 1,286 psi

Time Set Packer(s) 6:13 P.M. Time Started off Bottom 9:13 P.M. Maximum Temperature 113°  
 Initial Hydrostatic Pressure.....(A) 1580 P.S.I.  
 Initial Flow Period.....Minutes 45 (B) 7 P.S.I. to (C) 30 P.S.I.  
 Initial Closed In Period.....Minutes 45 (D) 1100 P.S.I.  
 Final Flow Period.....Minutes 45 (E) 31 P.S.I. to (F) 53 P.S.I.  
 Final Closed In Period.....Minutes 45 (G) 1091 P.S.I.  
 Final Hydrostatic Pressure.....(H) 1579 P.S.I.

# DIAMOND TESTING

## General Information Report

### General Information

Company Name CASTLE RESOURCES, INC.  
 Contact JERRY GREEN  
 Well Name ROSS #1  
 Unique Well ID DST #1, ARBUCKLE, 3262-3272  
 Surface Location SEC 11-18S-8W, RICE CO. KS.  
 Field GENESEO-EDWARDS  
 Well Type Vertical  
 Test Type STRADDLE  
 Formation DST #1, ARBUCKLE, 3262-3272  
 Well Fluid Type 01 Oil

Representative TIM VENTERS  
 Well Operator CASTLE RESOURCES, INC.  
 Report Date 2012/11/29  
 Prepared By TIM VENTERS  
 Qualified By JERRY GREEN

Start Test Date 2012/11/28  
 Final Test Date 2012/11/28

Start Test Time 16:05:00  
 Final Test Time 23:48:00

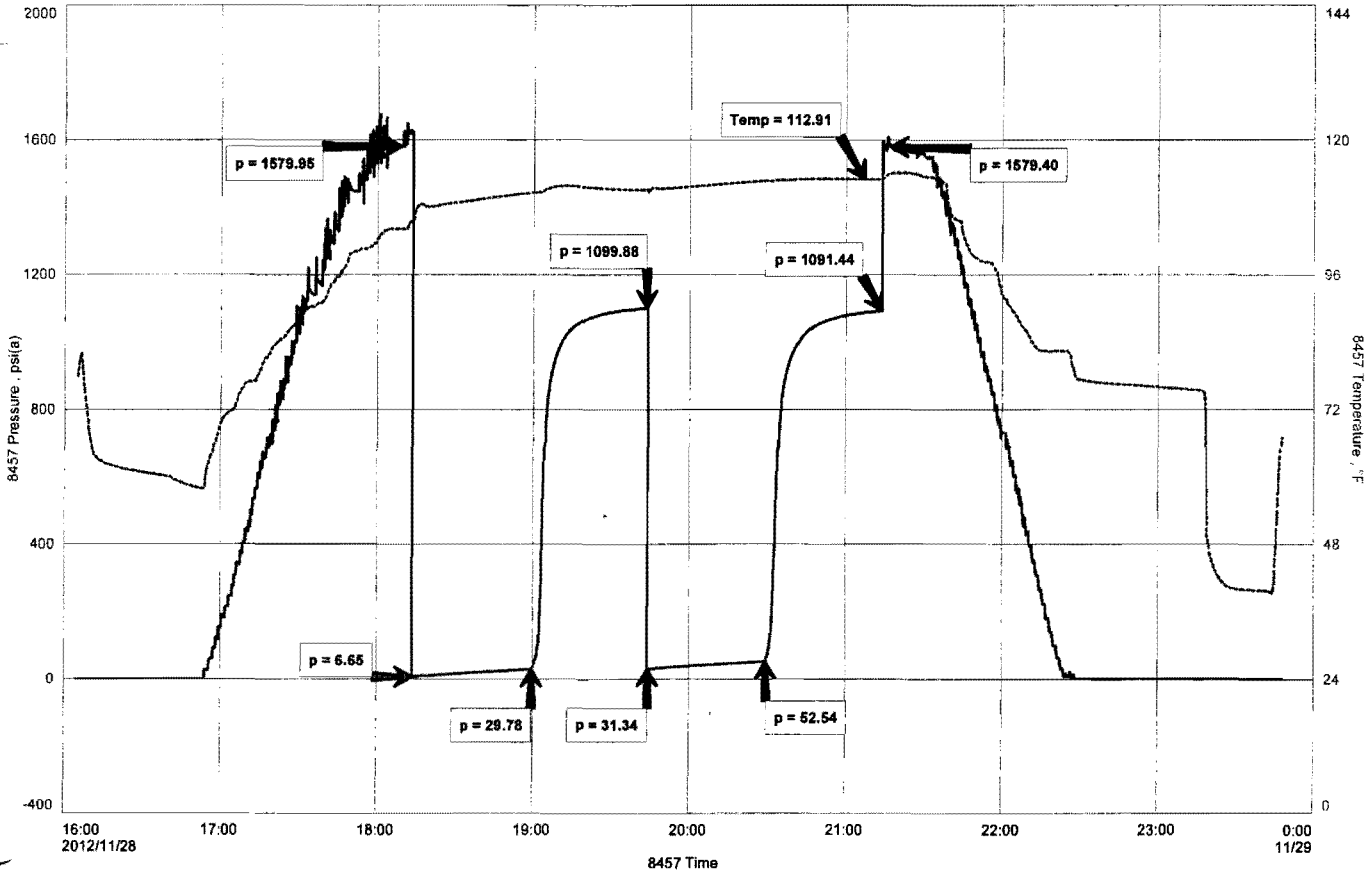
### Test Recovery:

RECOVERED: 930' GAS IN PIPE  
 85' GO, 3% GAS, 97% OIL, GRAVITY: 40  
 40' G,HO&WCM, 4% GAS, 35% OIL, 20% WATER, 41% MUD  
 125' TOTAL FLUID

TOOL SAMPLE: 43% OIL, 14% WATER, 43% MUD

CHLORIDES: 16,000 ppm  
 PH: 7.0  
 RW: .57 @ 61 deg.

# ROSS #1



11-28-12  
 Ross #1  
 DST #1  
 Middle Recorder

11-28-12  
 Ross #1  
 DST #1  
 Bottom Recorder

