



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1155824
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

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



1155824

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

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

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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 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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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

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 <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Castelli Exploration
6908 NW 112th
Oklahoma City, OK 73112
ATTN: Rick Pope

25-33S-16W Comanche
Charlie Brown 1-25
Job Ticket: 50985 **DST#: 1**
Test Start: 2013.06.17 @ 23:25:15

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: 54.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.99 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 6000.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl

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

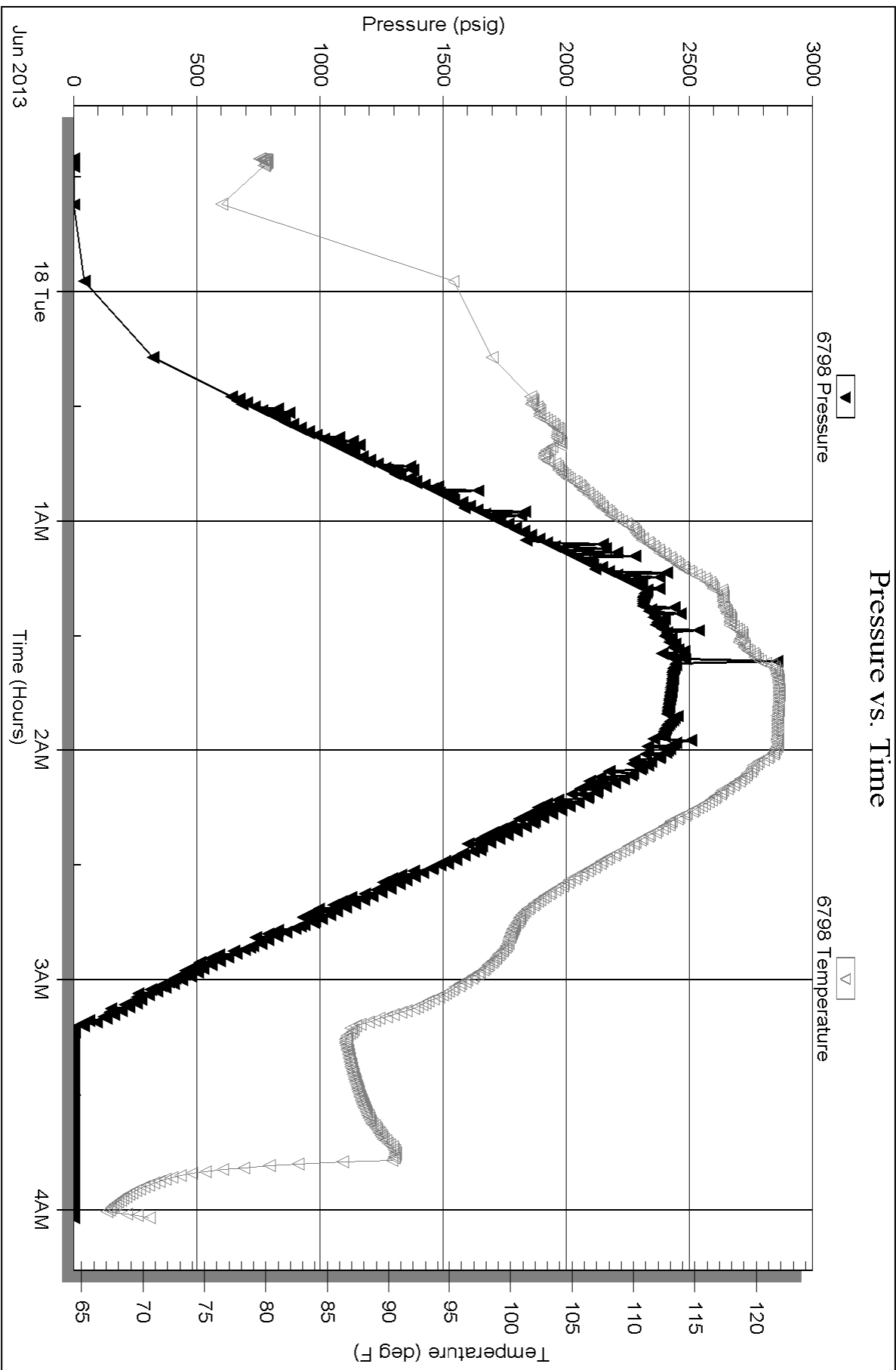
Serial #: 6798

Inside

Castelli Exploration

Charlie Brown 1-25

DST Test Number: 1





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Castelli Exploration
6908 NW 112th
Oklahoma City, OK 73112
ATTN: Rick Popp

25-33S-16W Comanche

Charlie Brown 1-25

Job Ticket: 50986 **DST#: 2**
Test Start: 2013.06.18 @ 10:25:32

GENERAL INFORMATION:

Formation: **Mississippi**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 13:32:02
Time Test Ended: 17:53:02
Interval: **4987.00 ft (KB) To 5036.00 ft (KB) (TVD)**
Total Depth: 5036.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Good
Test Type: Conventional Bottom Hole (Reset)
Tester: Leal Cason
Unit No: 45
Reference Elevations: 1769.00 ft (KB)
1756.00 ft (CF)
KB to GR/CF: 13.00 ft

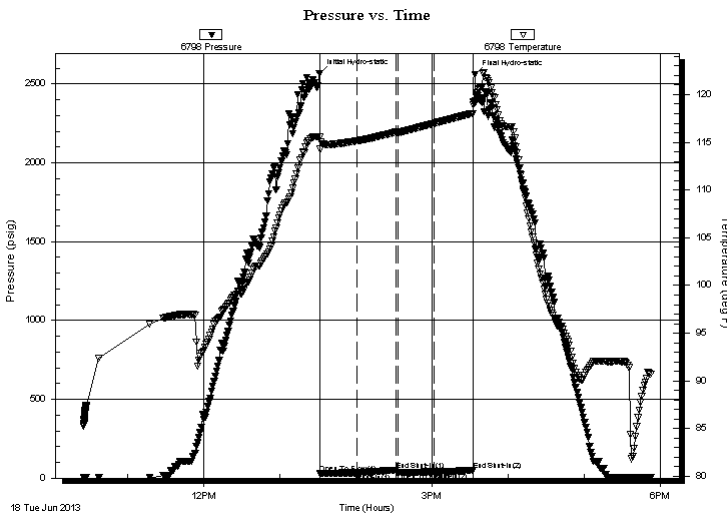
Serial #: 6798

Inside

Press @ Run Depth: 39.98 psig @ 4988.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2013.06.18 End Date: 2013.06.18 Last Calib.: 2013.06.18
Start Time: 10:25:33 End Time: 17:53:02 Time On Btm: 2013.06.18 @ 13:31:17
Time Off Btm: 2013.06.18 @ 15:33:47

TEST COMMENT: IF: Weak Surface Blow , Dead @ 26 minutes
IS: No Blow Back
FF: No Blow
FS: No Blow Back

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2567.75	115.55	Initial Hydro-static
1	27.82	114.29	Open To Flow (1)
30	33.40	115.15	Shut-In(1)
61	51.53	116.08	End Shut-In(1)
62	34.48	116.00	Open To Flow (2)
91	39.98	116.98	Shut-In(2)
121	48.49	118.03	End Shut-In(2)
123	2560.77	119.17	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	Mud	0.02

* Recovery from multiple tests

Gas Rates

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



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DRILL STEM TEST REPORT

FLUID SUMMARY

Castelli Exploration
6908 NW 112th
Oklahoma City, OK 73112
ATTN: Rick Popp

25-33S-16W Comanche
Charlie Brown 1-25
Job Ticket: 50986 **DST#: 2**
Test Start: 2013.06.18 @ 10:25:32

Mud and Cushion Information

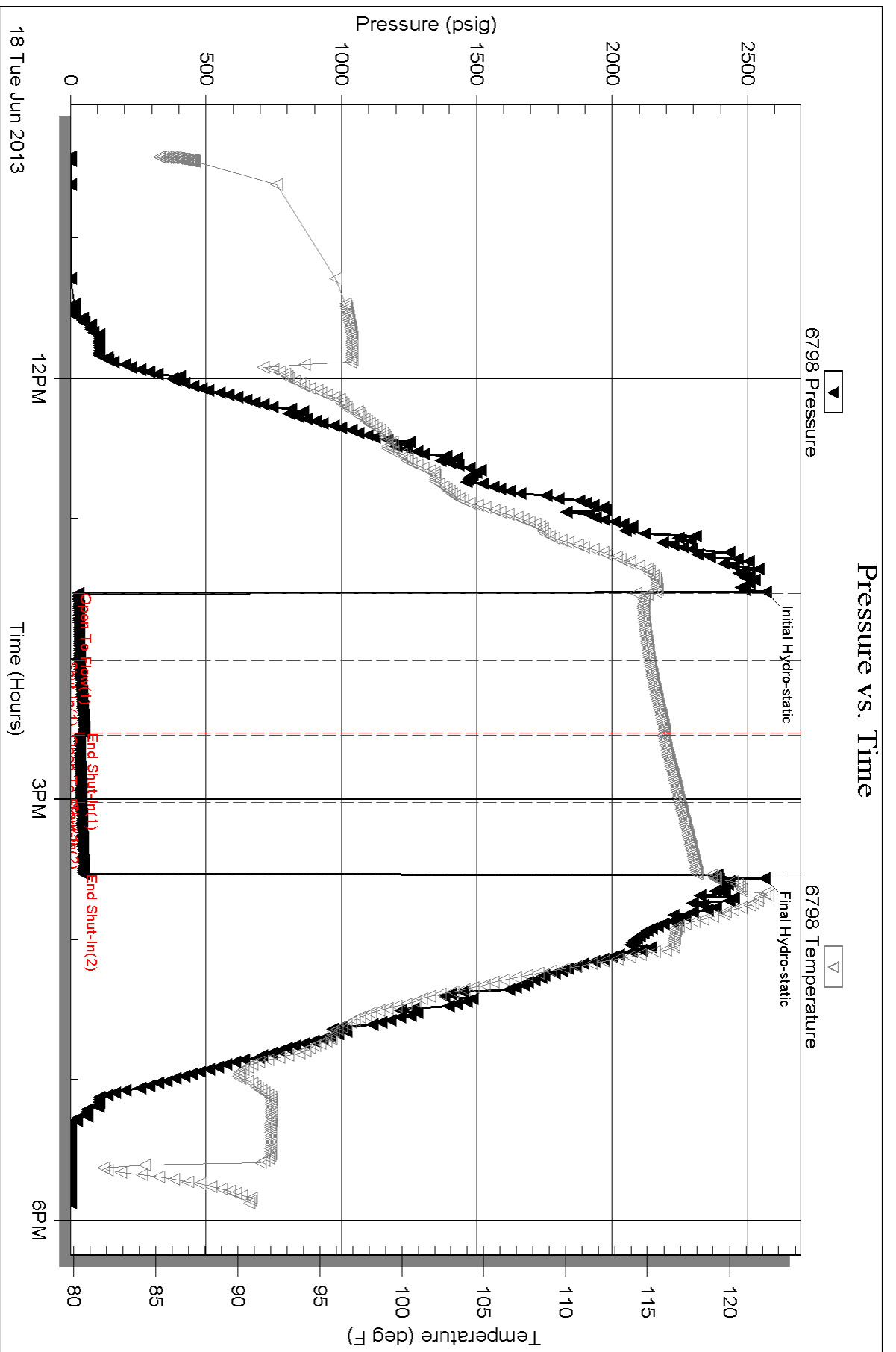
Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 49.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.59 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 6000.00 ppm			
Filter Cake: 0.02 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	Mud	0.025

Total Length: 5.00 ft Total Volume: 0.025 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:





TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Castelli Exploration
 6908 NW 112th
 Oklahoma City, OK 73112
 ATTN: Rick Popp

25-33S-16W Comanche
Charlie Brown 1-25
 Job Ticket: 50987 **DST#: 3**
 Test Start: 2013.06.19 @ 04:34:41

GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 06:55:11
 Time Test Ended: 13:14:41
 Interval: **5045.00 ft (KB) To 5090.00 ft (KB) (TVD)**
 Total Depth: 5090.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good
 Test Type: Conventional Bottom Hole (Reset)
 Tester: Leal Cason
 Unit No: 45
 Reference Elevations: 1769.00 ft (KB)
 1756.00 ft (CF)
 KB to GR/CF: 13.00 ft

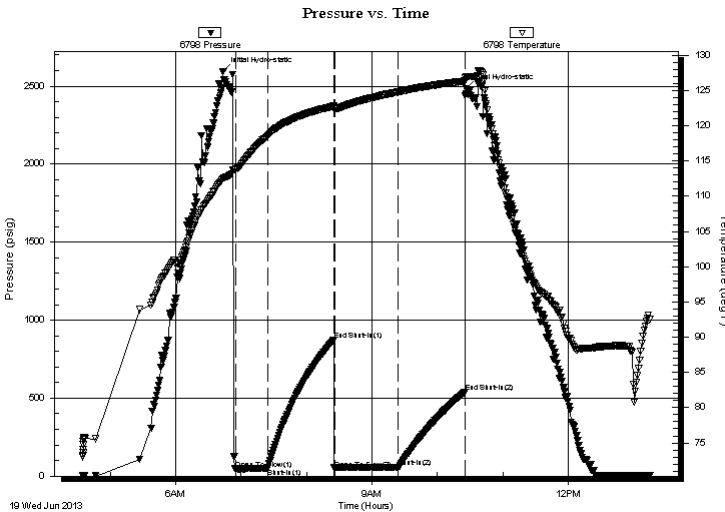
Serial #: 6798

Inside

Press @ Run Depth: 56.97 psig @ 5046.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2013.06.19 End Date: 2013.06.19 Last Calib.: 2013.06.19
 Start Time: 04:34:42 End Time: 13:14:41 Time On Btm: 2013.06.19 @ 06:43:26
 Time Off Btm: 2013.06.19 @ 10:26:11

TEST COMMENT: IF: Strong Blow , BOB in 30 seconds
 IS: No Blow Back
 FF: Strong Blow , BOB in 30 seconds
 FS: No Blow Back

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2595.59	112.49	Initial Hydro-static
12	45.76	113.78	Open To Flow (1)
41	50.59	118.58	Shut-In(1)
102	871.90	122.80	End Shut-In(1)
103	45.88	122.44	Open To Flow (2)
161	56.97	124.80	Shut-In(2)
222	538.32	126.35	End Shut-In(2)
223	2482.47	126.97	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
0.00	1054 GIP	0.00
70.00	GCM 5%G 95%M	0.34

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
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DRILL STEM TEST REPORT

FLUID SUMMARY

Castelli Exploration
6908 NW 112th
Oklahoma City, OK 73112
ATTN: Rick Popp

25-33S-16W Comanche
Charlie Brown 1-25
Job Ticket: 50987 **DST#: 3**
Test Start: 2013.06.19 @ 04:34:41

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: 45.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.59 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 6000.00 ppm			
Filter Cake: 0.02 inches			

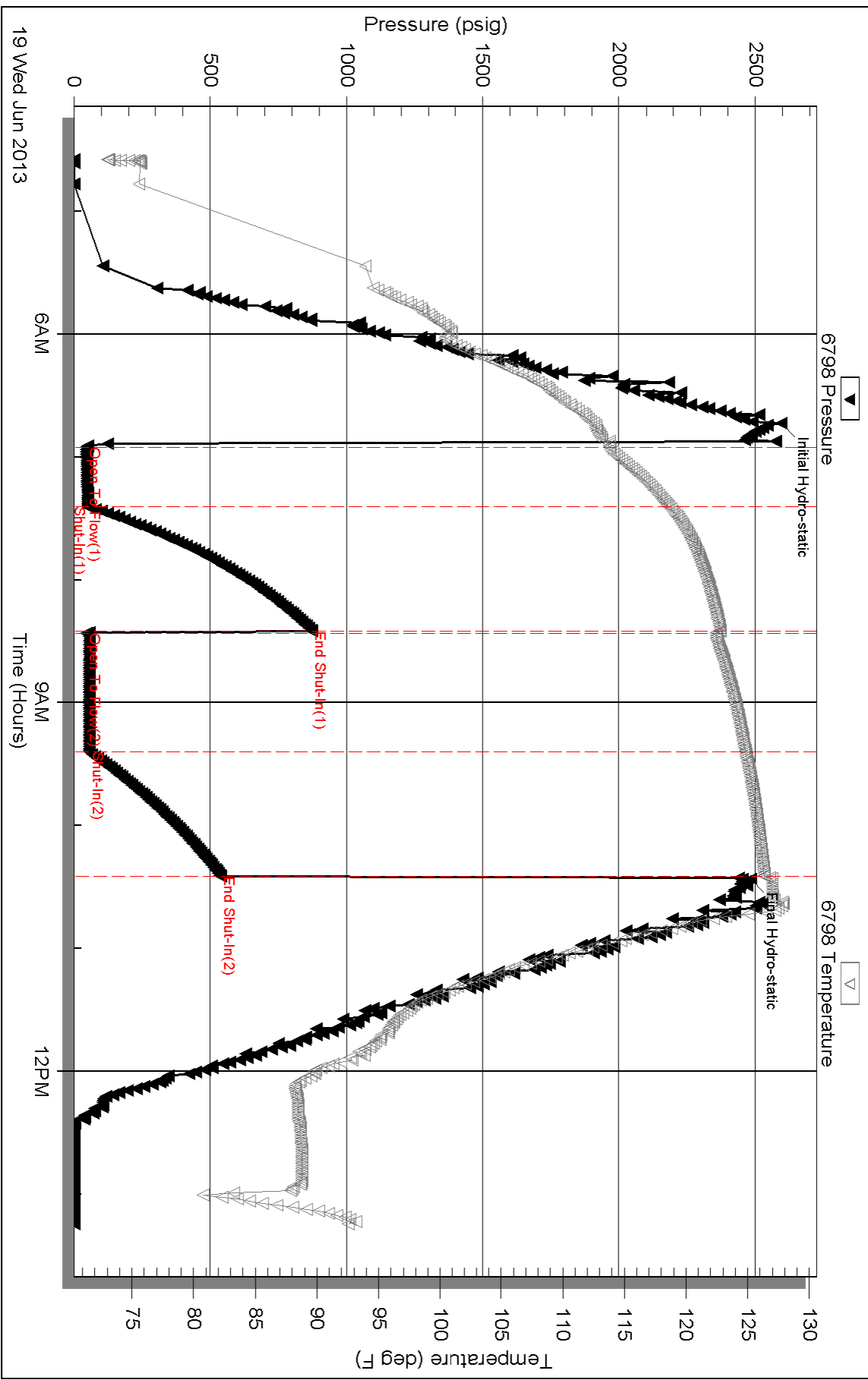
Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	1054 GIP	0.000
70.00	GCM 5%G 95%M	0.344

Total Length: 70.00 ft Total Volume: 0.344 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

Pressure vs. Time





TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Castelli Exploration
 6908 NW 112th
 Oklahoma City, OK 73112
 ATTN: Rick Pope

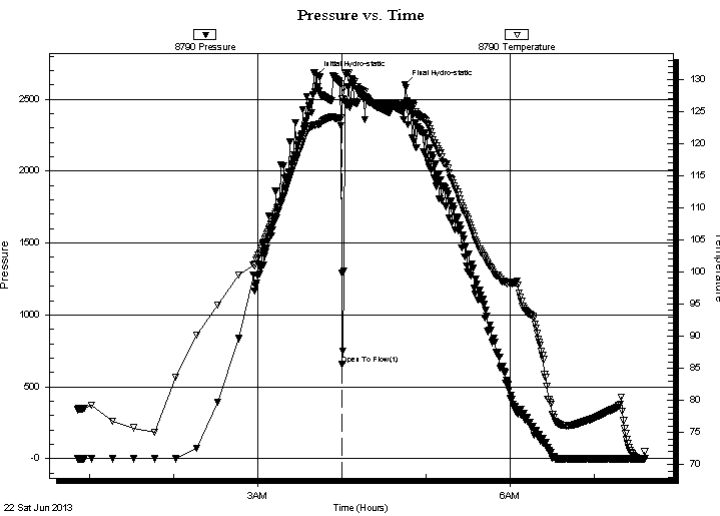
25-33S-16W Comanche
Charlie Brown 1-25
 Job Ticket: 52329 **DST#: 4**
 Test Start: 2013.06.22 @ 00:51:46

GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 04:00:31
 Time Test Ended: 07:36:01
 Interval: **5090.00 ft (KB) To 5140.00 ft (KB) (TVD)**
 Total Depth: 5600.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Straddle (Reset)
 Tester: Ryan Reynolds
 Unit No: 48
 Reference Elevations: 1769.00 ft (KB)
 1756.00 ft (CF)
 KB to GR/CF: 13.00 ft

Serial #: 8790 Inside
 Press @ RunDepth: psig @ 5091.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2013.06.22 End Date: 2013.06.22 Last Calib.: 2013.06.22
 Start Time: 00:51:51 End Time: 07:36:00 Time On Btm: 2013.06.22 @ 03:42:01
 Time Off Btm: 2013.06.22 @ 04:45:01

TEST COMMENT: Packer Failure (attempted 3x's to seat)



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2664.43	122.95	Initial Hydro-static
19	656.56	126.98	Open To Flow (1)
63	2604.56	126.19	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
650.00	Drig mud 100%mud	7.45

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Castelli Exploration
6908 NW 112th
Oklahoma City, OK 73112
ATTN: Rick Pope

25-33S-16W Comanche
Charlie Brown 1-25
Job Ticket: 52329 **DST#: 4**
Test Start: 2013.06.22 @ 00:51:46

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 10.00 lb/gal	Cushion Length: ft	Water Salinity:	6000 ppm
Viscosity: 54.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.59 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 6000.00 ppm			
Filter Cake: 0.02 inches			

Recovery Information

Recovery Table

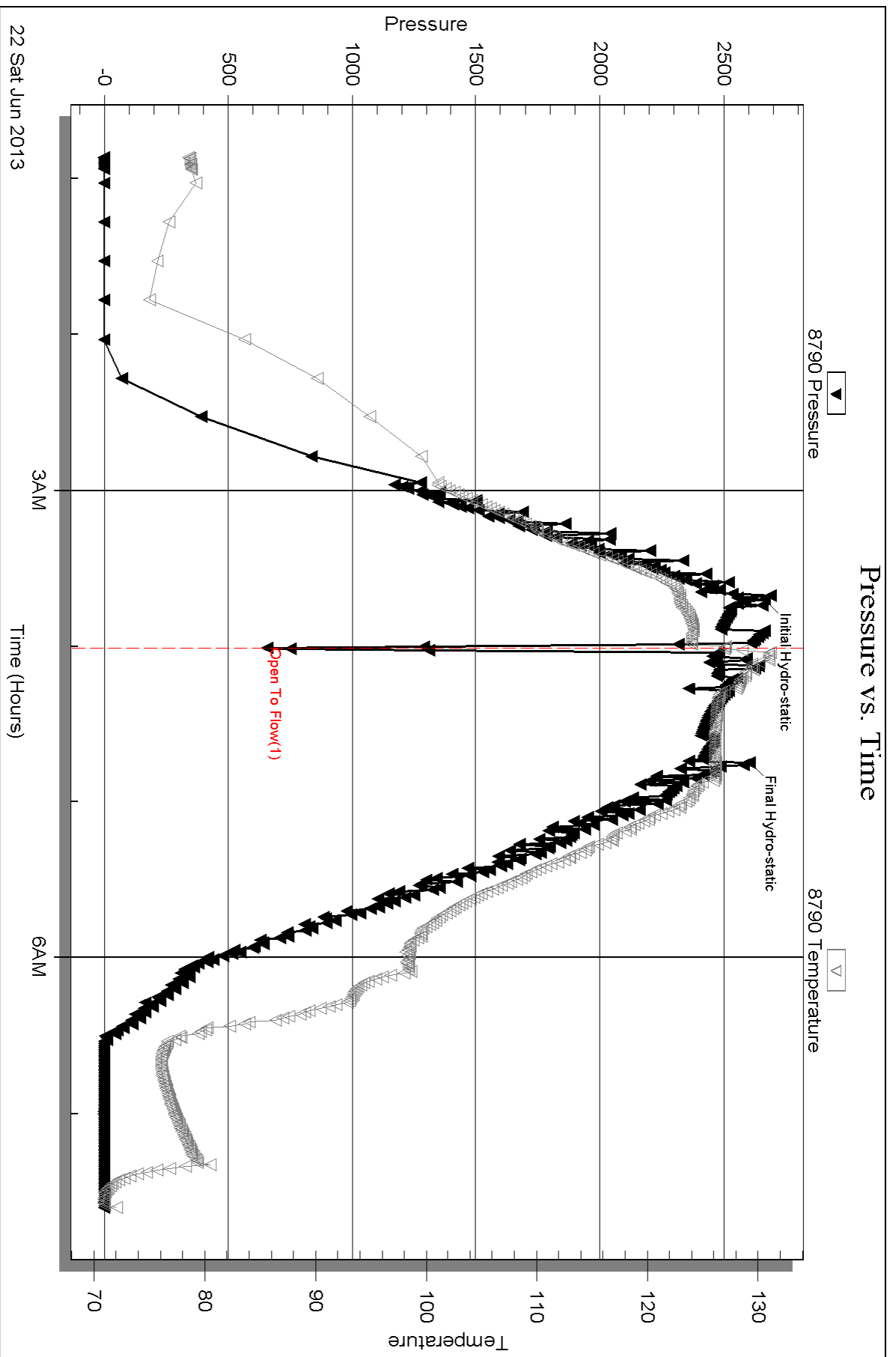
Length ft	Description	Volume bbl
650.00	Drig mud 100%mud	7.451

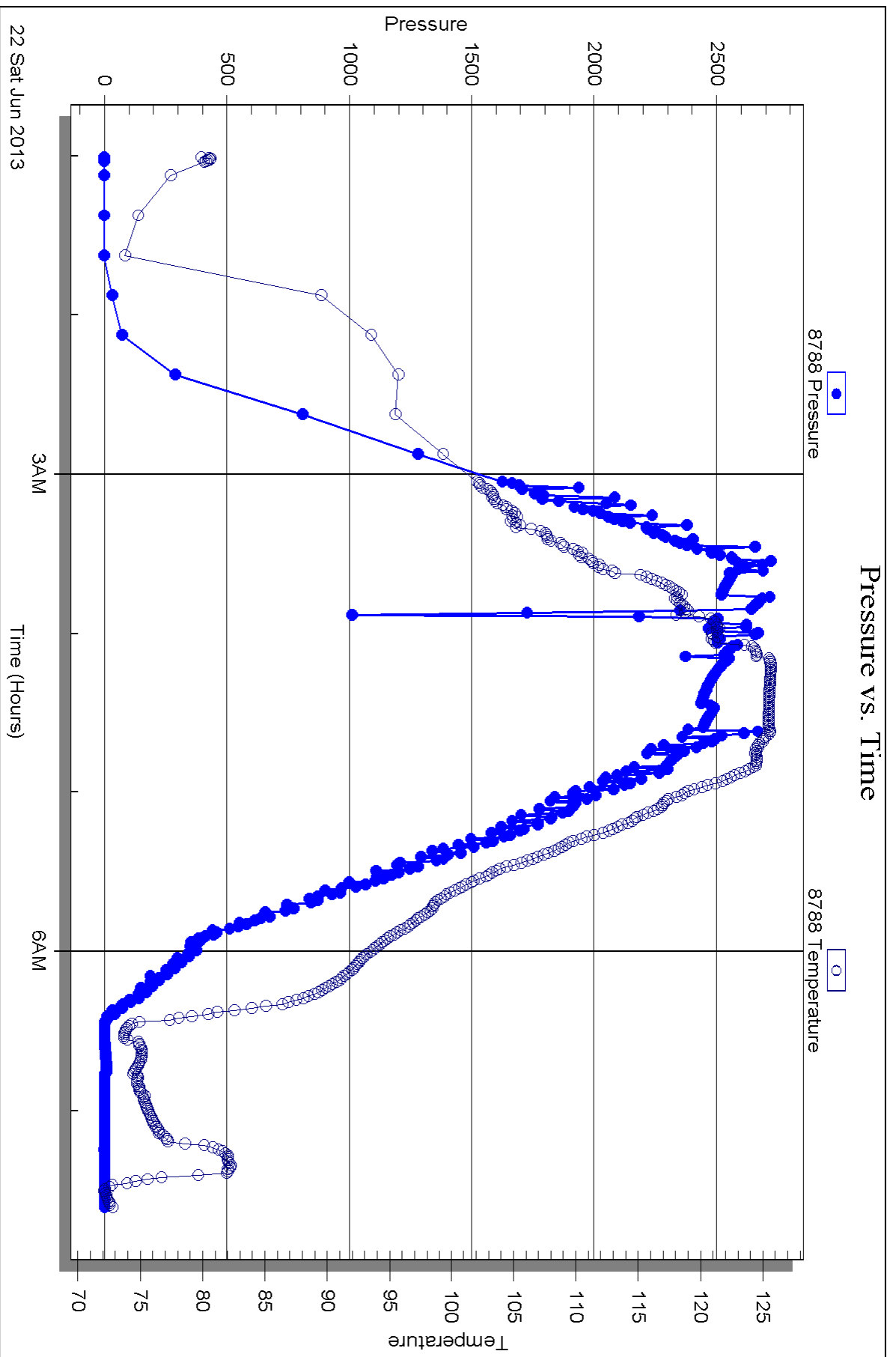
Total Length: 650.00 ft Total Volume: 7.451 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #: none

Laboratory Name: Laboratory Location:

Recovery Comments:







**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Castelli Exploration
6908 NW 112th
Oklahoma City, OK 73112
ATTN: Rick Pope

25-33S-16W Comanche
Charlie Brown 1-25
Job Ticket: 52330 **DST#: 5**
Test Start: 2013.06.22 @ 10:27:15

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 10.00 lb/gal	Cushion Length: ft	Water Salinity:	6000 ppm
Viscosity: 54.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.59 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 6000.00 ppm			
Filter Cake: 0.02 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
30.00	VSLI GCM w / oil spks 1%gas, 99%mud	0.148

Total Length: 30.00 ft Total Volume: 0.148 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #: none
 Laboratory Name: Laboratory Location:
 Recovery Comments:

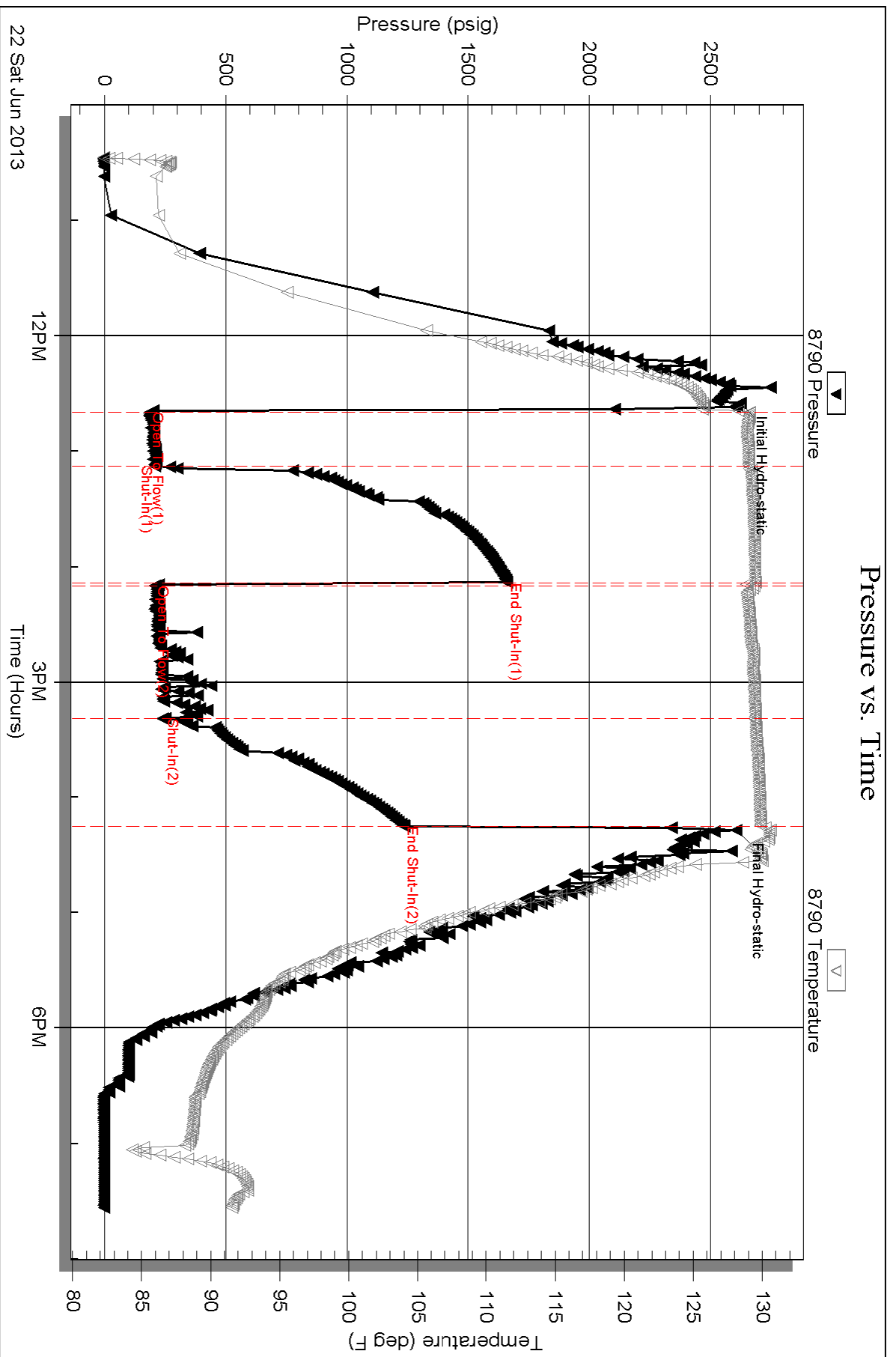
Serial #: 8790

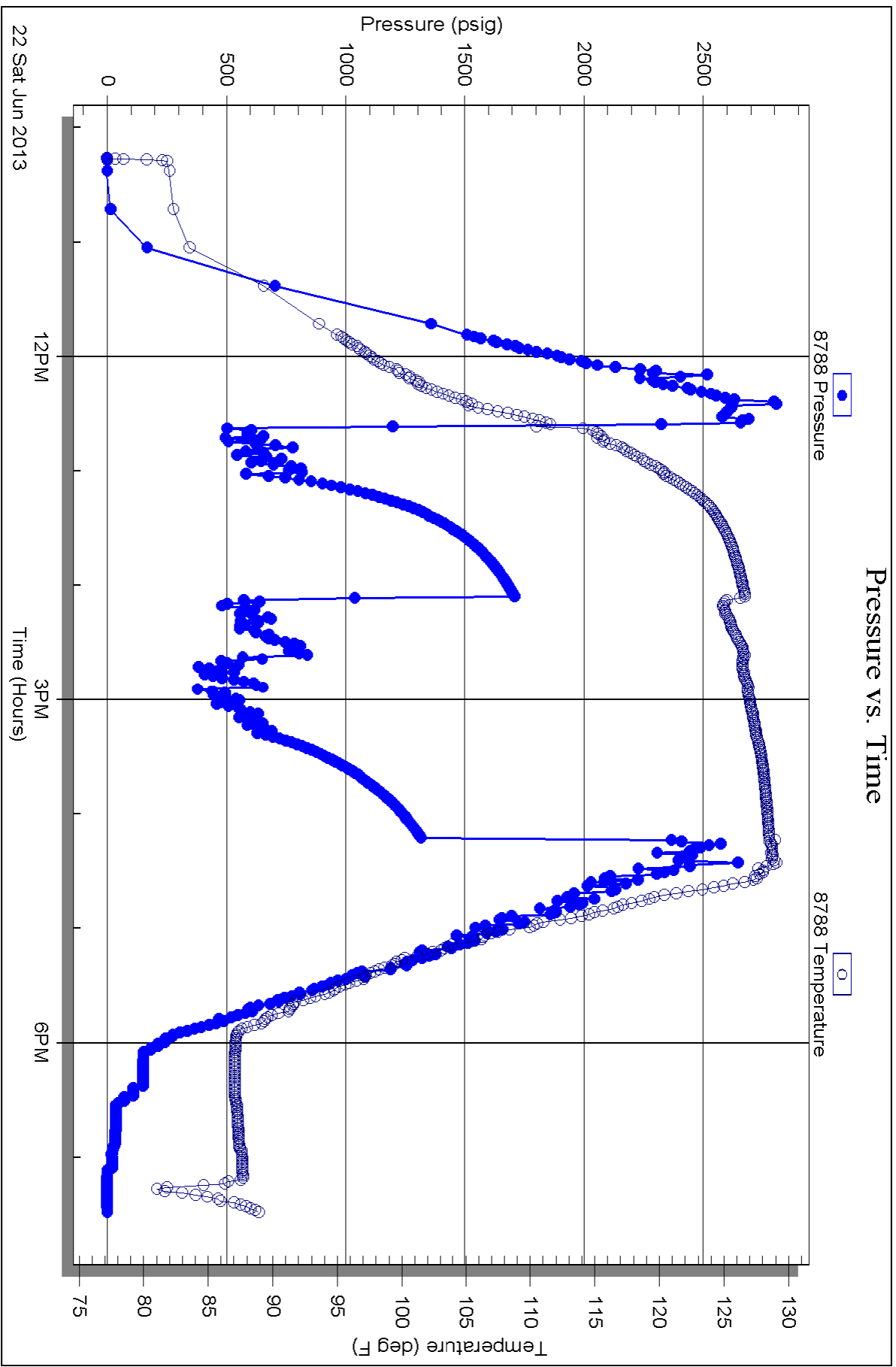
Inside

Castelli Exploration

Charlie Brown 1-25

DST Test Number: 5





ALLIED OIL & GAS SERVICES, LLC 059512

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Medicine Lodge

DATE <u>6-24-13</u>	SEC <u>25</u>	TWP <u>33S</u>	RANGE <u>16W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>7:15</u>
LEASE <u>Charlie Brown</u>	WELL # <u>124</u>	LOCATION <u>Deerhead Altam, S to Estill Rd,</u>			COUNTY <u>Comanche</u>	STATE <u>Kansas</u>	
OLD OR NEW (Circle one) <u>(N)</u>		LOCATION <u>1/2 W 2 S, Elinto</u>					

CONTRACTOR Duke #7
 TYPE OF JOB Production
 HOLE SIZE 7 7/8 T.D. 6000
 CASING SIZE 5 1/2 DEPTH 5988
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT 42.17
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT 144 Bbl
 EQUIPMENT
 PUMP TRUCK CEMENTER Ron Gilley
 # 558-555 HELPER Scott Priddy
 BULK TRUCK
 # 356-250 DRIVER Justin Bowler
 BULK TRUCK
 # DRIVER Joe Halcomb

OWNER Castelli Exp.
 CEMENT
 AMOUNT ORDERED 455 x 60' 40' 49' total
225 x class A ASC + 5# Kolscoat 5%
F1-160 + 14# Defoamer
 COMMON A 27 sk @ 17.90 483.30
 POZMIX 18 sk @ 9.35 168.30
 GEL 2 @ 23.40 46.80
 CHLORIDE @
 ASC 225 sk @ 20.90 4702.50
Kolscoat 1125# @ -.98 1102.50
F1-160 63.45 @ 18.90 1199.20
Defoamer 31.5 @ 9.80 308.70
Clapro 14 Gals @ 34.40 481.60
 @
 @
 @
 @
 HANDLING 341.58 @ 2.48 847.11
 MILEAGE 14.60/35/2.60 @ 2.60 1328.78
 TOTAL 10,668.79

REMARKS:
See Cement Log

CHARGE TO: Castelli Exp.
 STREET _____
 CITY _____ STATE _____ ZIP _____

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 Ruby Papp
 SIGNATURE Ruby Papp

SERVICE
 DEPTH OF JOB 6000'
 PUMP TRUCK CHARGE 3149.18
 EXTRA FOOTAGE @
 MILEAGE 35 @ 7.70 269.50
 MANIFOLD @ 275.00
Light Veh. 35 @ 4.40 154.00
 @
 TOTAL 3848.28

5 1/2 PLUG & FLOAT EQUIPMENT
 1- AFU Float Shop @ 339.30
 1- Latch Down Plug Assn @ 398.75
 2- Baskets @ 161.25 322.50
 10- Turbolizers @ 48.30 483.00
 @
 TOTAL 1543.55

SALES TAX (If Any) _____
 TOTAL CHARGES 16,060.62
 DISCOUNT _____ IF PAID IN 30 DAYS
NET 11,276.89

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

August 20, 2013

Tisha Love
Castelli Exploration, Inc.
6908 NW 112TH
OKLAHOMA CITY, OK 73162-2976

Re: ACO1
API 15-033-21720-00-00
Charlie Brown 1-25
NE/4 Sec.25-33S-16W
Comanche County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Tisha Love