



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1262217
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: _____

1262217

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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)*

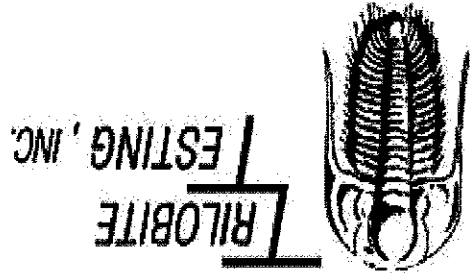
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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DRILL STEM TEST REPORT

Prepared For: Castle Resources Inc

Box 87

Schoenchen KS 67667-0087

ATTN: Jerry Green

Constance #1

6-8s-17w Rooks,KS

Start Date: 2015.08.19 @ 10:56:03

End Date: 2015.08.19 @ 17:40:57

Job Ticket #: 62656

DST #: 1

Trilobite Testing, Inc

1515 Commerce Parkway Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

DRILL STEM TEST REPORT



TRILOBITE TESTING, INC.

Castle Resources Inc

Box 87
Schoenchen KS 67667-0087

6-8s-17w Rooks,KS

Constance #1

Job Ticket: 62656
DST#:1

ATTN: Jerry Green
Test Start: 2015.08.19 @ 10:56:03

GENERAL INFORMATION:

Formation: Arbuckle
Deviated: No
Whipstock: No
Test Type: Conventional Bottom Hole (Initial)
Tester: Ray Schwager
Unit No: 70
Reference Elevations: 1934.00 ft (KB)
1929.00 ft (CF)
5.00 ft
Interval: 3361.00 ft (KB) To 3384.00 ft (KB) (TVD)
Total Depth: 3384.00 ft (KB) (TVD)
Hole Diameter: 7.88 inchesHole Condition: Fair

Serial #: 8700

Outside

psig @ 3362.00 ft (KB)

Capacity: 8000.00 psig

Start Time: 10:55:48

End Time: 17:40:27

Start Date: 2015.08.19

Last Calib.: 2015.08.19

End Date: 2015.08.19

Time On Btm: 17:40:27

Time Off Btm:

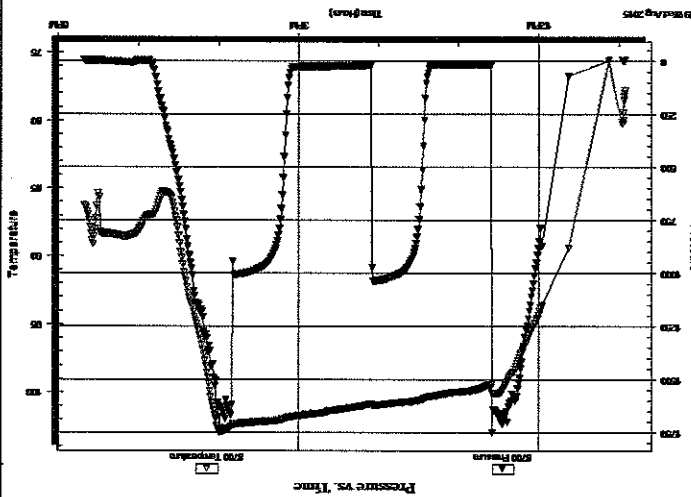
TEST COMMENT: 45-FP-w k bl thru-out surface to 1/4" bl

45-SIP-no bl

60-FP-w k bl thru-out 1/4" bl

45-FSIP-no bl

PRESSURE SUMMARY



Recovery

Length (ft)	Description	Volume (bbl)
0.00	80' GFP	0.00
40.00	CO	0.56
10.00	OCM 10%O90%M	0.14

Gas Rates

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

Trilobite Testing, Inc

Ref. No: 62656

Printed: 2015.08.20 @ 13:47:50



DRILL STEM TEST REPORT

FLUID SUMMARY

6-8s-17w Rooks,KS

Castle Resources Inc

Constance #1

Box 87
Schoenchen KS 67667-0087

Job Ticket: 62656
DST#:1

ATTN: Jerry Green

Test Start: 2015.08.19 @ 10:56:03

Mud and Cushion Information

Mud Type: Gel Chem
Mud Weight: 9.00 lb/gal
Viscosity: 52.00 sec/qt
Water Loss: 7.93 in³
Resistivity: ohm.m
Salinity: 5000.00 ppm
Filter Cake: 1.00 inches

Cushion Type:
Cushion Length: ft
Cushion Volume: bbl
Gas Cushion Type:
Gas Cushion Pressure: psig

Oil API: 30 deg API
Water Salinity: ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	80' GIP	0.000
40.00	CO	0.561
10.00	OCM 10%O90%M	0.140

Total Length: 50.00 ft
Total Volume: 0.701 bbl

Num Fluid Samples: 0
Num Gas Borts: 0
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

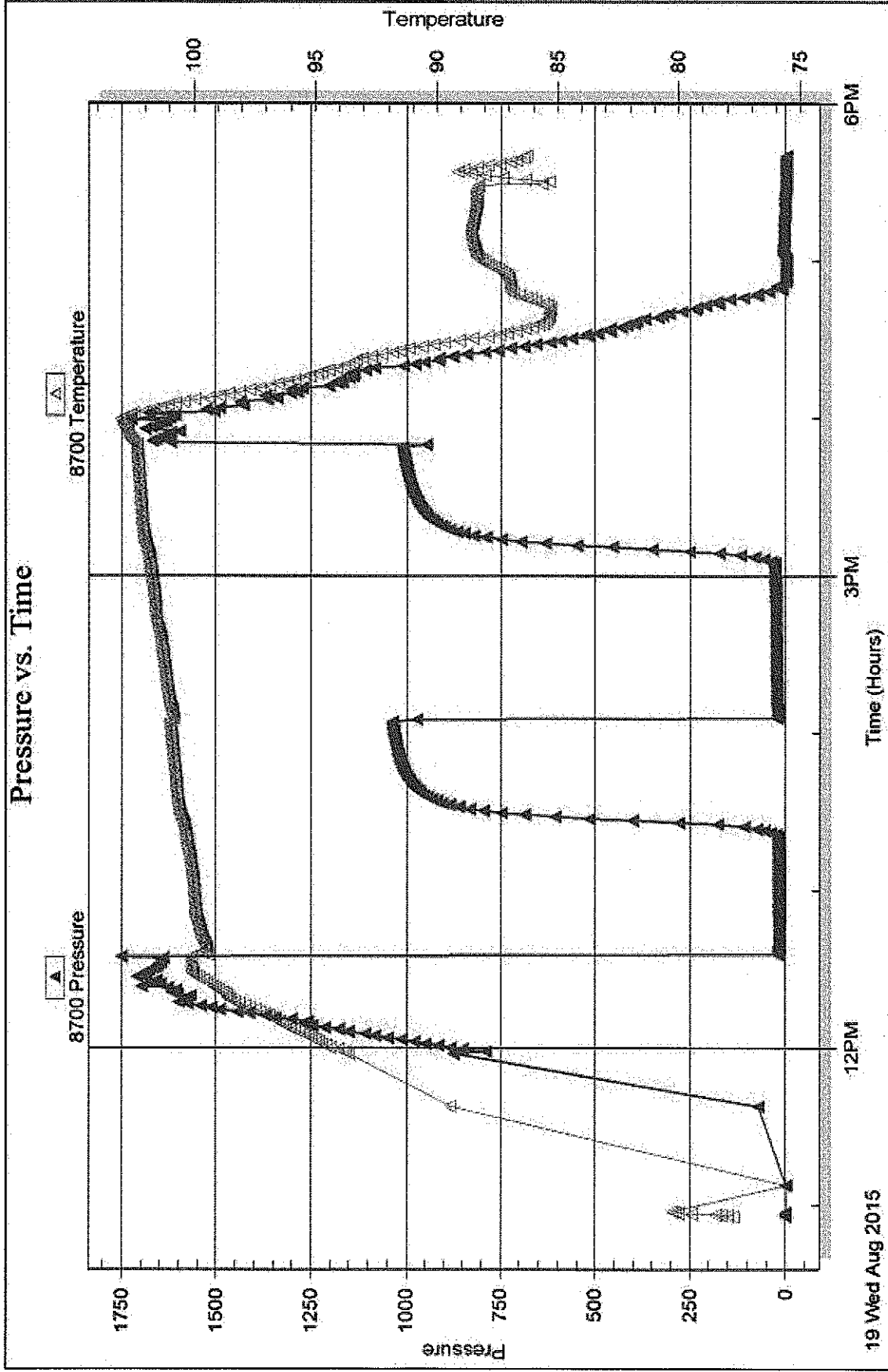
Serial #: 8700

Outside Castle Resources Inc.

Constance #1

DST Test Number: 1

Pressure vs. Time



Tribble Testing, Inc

Ref. No: 62656

Printed: 2015.08.20 @ 13:47:51

DRILL STEM TEST REPORT



Castle Resources Inc
Box 87
Schoenchen KS 67667-0087
Job Ticket: 62657
Constance #1
DST#:2
ATTN: Jerry Green
Test Start: 2015.08.19 @ 23:15:25

GENERAL INFORMATION:

Formation: Arbuckle
Deviated: No
Whipstock: No
ft (KB)
Time Tool Opened: 01:23:20
Time Test Ended: 06:26:04
Interval: 3361.00 ft (KB) To 3389.00 ft (KB) (TVD)
Total Depth: 3389.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches-Hole Condition: Fair
KB to GR/CF: 5.00 ft
Reference Elevations: 1934.00 ft (KB)
1929.00 ft (CF)

Serial #: 8018

Inside
60.23 psig @ 3367.00 ft (KB)
Press@RunDepth:

Start Date: 2015.08.19
End Date: 2015.08.20
Start Time: 23:15:25
End Time: 06:26:04

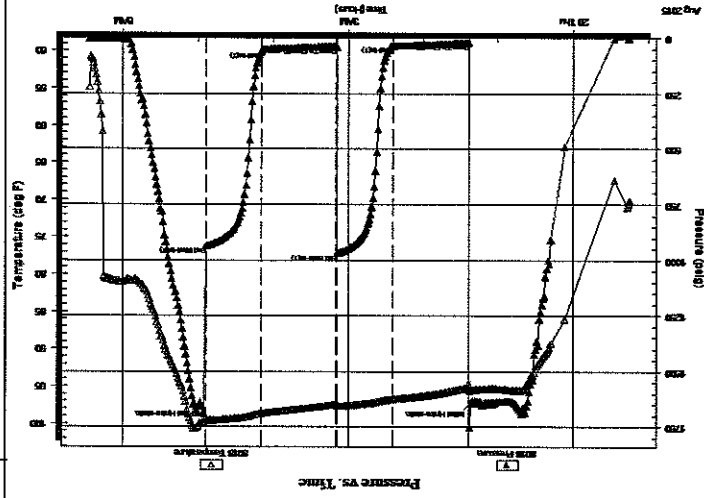
Capacity: 8000.00 psig
Last Calib.: 2015.08.20
Time On Birm: 2015.08.20 @ 01:21:35
Time Off Birm: 2015.08.20 @ 04:58:34

TEST COMMENT:

60-FFP-wk bl thru-out 1/2" to 2" bl
45-SIP-no bl
60-FFP-wk bl thru-out 1" to 2 1/4" bl
45-FSIP-surface bl bk

PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1639.47	95.53	Initial Hydro-static
2	22.08	94.70	Open To Flow (1)
63	35.70	96.76	Shut-in(1)
107	969.58	97.75	End Shut-in(1)
108	38.48	97.53	Open To Flow (2)
168	60.23	98.66	Shut-in(2)
213	935.72	99.64	End Shut-in(2)
217	1638.20	99.98	Final Hydro-static



Recovery

Length (ft)	Description	Volume (bbl)
0.00	150' GIP	0.00
70.00	CO	0.98
20.00	HOR&GCM 10%G40%O50%M	0.28

* Recovery from multiple tests

Gas Rates

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

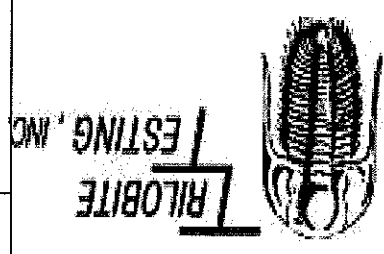
Trilobite Testing, Inc

Ref. No: 62657

Printed: 2015.08.20 @ 13:46:35

TOOL DIAGRAM

DRILL STEM TEST REPORT



Castle Resources Inc
 6-8s-17w Rooks,KS
 Constance #1
 Schoenchen KS 67667-0087
 Job Ticket: 62657
 DST#:2
 ATTN: Jerry Green
 Test Start: 2015.08.19 @ 23:15:25

Tool Information

Drill Pipe:	Length: 3359.00 ft	Diameter: 3.80 inches	Volume: 47.12 bbl	Tool Weight: 2200.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 55000.00 lb
Drill Pipe Above KB:		Total Volume: 47.12 bbl		
Depth to Top Packer:	3361.00 ft	Tool Chased 0.00 ft		
Depth to Bottom Packer:	ft	String Weight: Initial 40000.00 lb		
Interval betw een Packers:	28.00 ft	Final 41000.00 lb		
Tool Length:	49.00 ft			
Number of Packers:	2	Diameter:	6.75 inches	
Tool Comments:				

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
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Change Over Sub	1.00				3341.00
Shut In Tool	5.00				3346.00
Hydraulic tool	5.00				3351.00
Packer	5.00				3356.00
Packer	5.00				3361.00
Stub	1.00				3362.00
Perforations	5.00				3367.00
Recorder	0.00	8018	Inside		3367.00
Recorder	0.00	8700	Outside		3367.00
Perforations	19.00				3386.00
Bullnose	3.00				3389.00
Total Tool Length:					49.00

Bottom Of Top Packer	21.00				3356.00
Bottom Packers & Anchor	28.00				3389.00

DST Test Number: 2

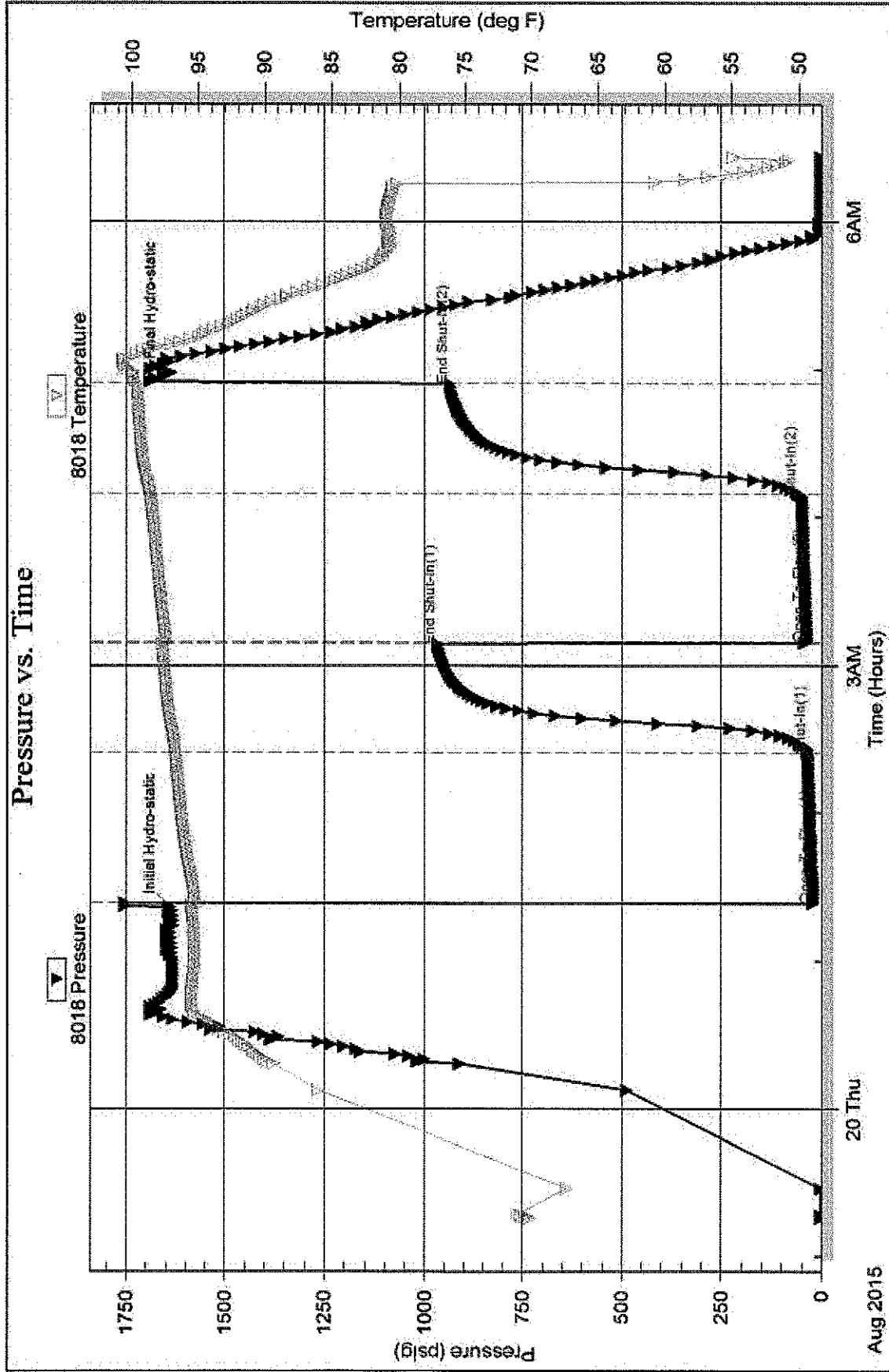
Constance #1

Castle Resources Inc.

Inside

Serial #: 8018

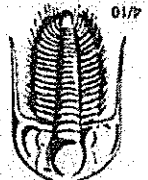
Pressure vs. Time



Printed: 2015.08.20 @ 13:46:36

Ref. No: 62657

Triacble Testing, Inc



TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket
NO. 62656

Well Name & No.	Constance #1
Company	Castle Resources Inc
Address	Box B7 Schencker, Ks 67667-0087
Co. Rep / Geo.	Terry Green
Location: Sec.	6 Twp. 8 Rge. 17
	Co. Rocks State Ks
Test No.	1
Date	8-19-15
Elevation	1934
KB	1929
GL	

Interval Tested	Zone Tested	Drill Pipe Run	Mud Wt.	Drill Collars Run	WI. Pipe Run	Chlorides ppm System	Total Depth	Blow Description
3361-3384	Abu. Kls	3361	9.4	3356	8	5000	3384	IFP - Dark Blow thru-out surface to 1/2" Blow
23								ISIP - NO Blow
								FFP - Dark Blow thru-out 1/2" Blow
								FFP - NO Blow
								FFP - NO Blow

Rec	80	40	10	10	10	10
Rec	80	40	10	10	10	10
Feet of	67	60	0 CM	0 CM	0 CM	0 CM
%gas						
%oil						
%water						
%mud						

Rec Total	50
BHT	102
Gravim	30
API RW	1050
@	
F Chlorides	
ppm	
T-On Location	1000
T-Started	1055
T-Open	1235
T-Pulled	1550
T-Out	1740
Comments	

Rec	50
(A) Initial Hydrostatic	1650
(B) First Initial Flow	22
(C) First Final Flow	27
(D) Initial Shut-in	1039
(E) Second Initial Flow	25
(F) Second Final Flow	31
(G) Final Shut-in	1012
(H) Final Hydrostatic	1625
Initial Open	45
Initial Shut-in	45
Final Flow	45
Final Shut-in	45
Sub Total	1127
MP/DST Disc't	

Approved By Ray Schwaner Our Representative
 Trilobite Testing Inc. shall not be liable for damaged or any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

GLOBAL CEMENTING, L.L.C.

1714

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell, KS

DATE <u>8-21-15</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Constance</u>	WELL# <u>1</u>	LOCATION			COUNTY <u>Hooks</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (CIRCLE ONE)							

CONTRACTOR White Knight

TYPE OF JOB Long string

HOLE SIZE 7 7/8" T.D. 3475'

CASING SIZE 5 1/2" DEPTH 3471'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL Port collar DEPTH 1308'

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT 29'

CEMENT LEFT IN CSG. 280'

PERFS

DISPLACEMENT 11661

EQUIPMENT

PUMP TRUCK CEMENTER North - Brock

P#2 HELPER Woody

BULK TRUCK

P#4 DRIVER Watson

BULK TRUCK

DRIVER

OWNER

CEMENT

AMOUNT ORDERED 18000 lb cement 10% salt
200 gal 2% plaster 5 gal S.G. 1500 lb

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

REMARKS:

Run 25 hrs of 5 1/2 cas up and landing
11 - est circulation - back up and pump
surgical mud sweep and wash plug
with 1500PS cement @ 15 L/S - Shut
down and plug B4 = 3055' - wash pump
and 1100' float - use 81 bbl of H2O with
1.5% pressure @ 600PS - plug land
@ 81 bbl and 1500PS - Released and
float held

CHARGE TO: Castle Resources

STREET _____

CITY _____ STATE _____ ZIP _____

Global Cementing, L.L.C.,
You are hereby requested to rent cementing equipment and
furnish cement 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. Thank You.

PRINTED NAME _____

SIGNATURE Teresa Hunter

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

1 - 5 1/2" PC _____ @ _____

5 - 5 1/2" baskets _____ @ _____

2 - 5 1/2" baskets _____ @ _____

1 - 100' Plug _____ @ _____

1 - 80' Shoe _____ @ _____

500 gal mud flush _____ @ _____

10 bbl H2O _____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

GLOBAL CEMENTING, L.L.C.

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT RUSSELL, KS

DATE	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
8-15-15					2:45PM	4:30PM	5PM
LEASE <u>CONSTANCE</u>	WELL # <u>1</u>	LOCATION			COUNTY <u>ROCKS</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (CIRCLE ONE)							

CONTRACTOR WHITE KNIGHT

TYPE OF JOB SURFACE

HOLE SIZE <u>12 1/4</u>	T.D. <u>220'</u>
CASING SIZE <u>8 5/8</u>	DEPTH <u>220.85</u>
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2 XH</u>	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS	
DISPLACEMENT <u>12.75 BBL</u>	EQUIPMENT
PUMP TRUCK # <u>P1</u>	CEMENTER <u>Bead</u>
	HELPER <u>Jason</u>
BULK TRUCK # <u>B4</u>	DRIVER <u>Woody</u>
BULK TRUCK #	DRIVER

OWNER _____

CEMENT AMOUNT ORDERED 150 SK com 9% cc 2% sec

COMMON	@	
POZMIX	@	
GEL	@	
CHLORIDE	@	
ASC	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	@	
MILEAGE	@	

REMARKS:
RUN IN 5 JTS. 8 5/8 CASING - CIRCULATE
MUD - HOOK UP CEMENT - MIX 150 SK -
WASH UP & DISPLACE W/ 12.75 BBL H2O -
SHOT IN @ 200PSI - CEMENT DID CIRCULATE

CHARGE TO: CASILL'S RESOURCES

STREET _____

CITY _____ STATE _____ ZIP _____

Global Cementing, L.L.C.,
 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 _____

SIGNATURE Terry Austin

SERVICE

DEPTH OF JOB	
PUMP TRUCK CHARGE	
EXTRA FOOTAGE	@
MILEAGE	@
MANIFOLD	@
	@
	@

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS