

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 9860

Name: Castle Resources, Inc.

Address 1: PO BOX 583

Address 2: _____

City: RUSSELL State: KS Zip: 67665 + 0583

Contact Person: Jerry Green

Phone: (785) 625-5155

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-137-20771-00-00

Spot Description: _____

1320 feet from ☐ N / ☒ S Line of Section

660 feet from ☒ E / ☐ W Line of Section

GPS Location: Lat: _____, Long: _____

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Norton Elevation: _____ ☐ GL ☐ KB

Lease Name: JUENEMANN A Well #: 1

Well Type: (check one) ☒ Oil ☐ Gas ☐ OG ☐ WSW ☐ Other: _____

☐ SWD Permit #: _____ ☐ ENHR Permit #: _____

☐ Gas Storage Permit #: _____

Spud Date: 05/09/2024 Date Shut-In: 06/10/2026

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	na	8.625	4.5	na	na	na
Setting Depth		209	3715			
Amount of Cement		175	475			
Top of Cement		0	0			
Bottom of Cement		209	3715			

Casing Fluid Level from Surface: 1120 How Determined? fluid level gun Date: 09/25/2026

Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____

Do you have a valid Oil & Gas Lease? ☒ Yes ☐ No

Depth and Type: ☐ Junk in Hole at _____ (depth) ☐ Tools in Hole at _____ (depth) Casing Leaks: ☐ Yes ☐ No Depth of casing leak(s): _____

Type Completion: ☐ ALT. I ☒ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement

Packer Type: _____ Size: _____ Inch Set at: _____ Feet

Total Depth: 3715 Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Formation Name **Formation Top** **Formation Base** **Completion Information**

1. _____ At: _____ to _____ Feet Perforation Interval 3391 to 3675 Feet or Open Hole Interval _____ to _____ Feet

2. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This
Space - KCC USE ONLY

Date Tested: _____ Results: _____ Date Plugged: _____ Date Repaired: _____ Date Put Back in Service: _____

Review Completed by: SHANE JONES Comments: T/A# 4-007,138, ANHYDRITE @ 1925-2135

TA Approved: ☐ Yes ☒ Denied Date: 10/05/2026

Mail to the Appropriate KCC Conservation Office:

	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.682.7933
	KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.337.7400
	KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720	Phone 620.902.6450
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.261.6250

Well Name: Juenemann A1
Company: Castle Resources Inc
Test Date: Sep 25, 2026

Formation:
Location: Norton County

Fluid Level and Well Analysis Report

Juenemann A1

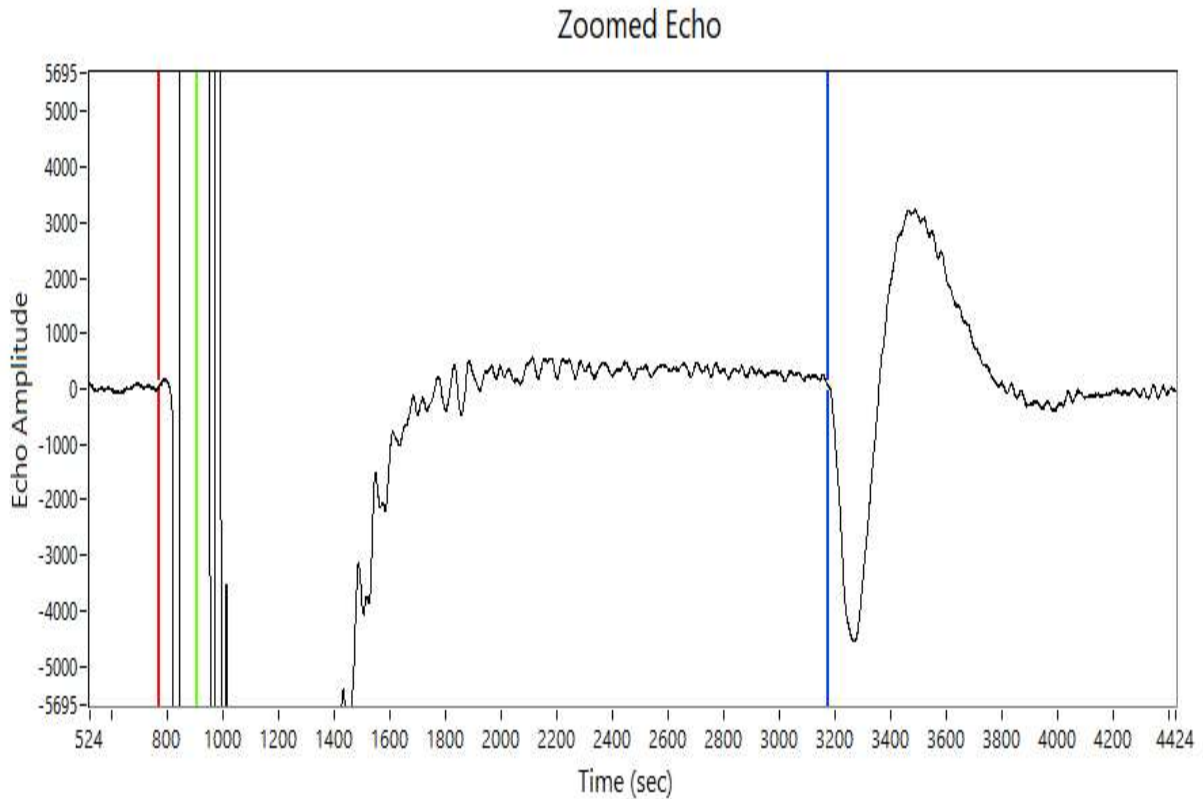
Castle Resources Inc

Norton County

Sep 25, 2026

Well Name: Juenemann A1
Company: Castle Resources Inc
Test Date: Sep 25, 2026

Formation:
Location: Norton County



Depth:	1120.00 ft
Return Time:	2.40 sec
Acoustic Velocity:	933.33 ft/s
Average Joint Length:	32.00 ft
Number of Joints:	35.00

10/05/2026

Jerry Green
Castle Resources, Inc.
PO BOX 583
RUSSELL, KS 67665-0583

Re: Temporary Abandonment
API 15-137-20771-00-00
JUNEMANN A 1
SE/4 Sec.29-03S-24W
Norton County, Kansas

Dear Jerry Green:

Your application for Temporary Abandonment (TA) for the above-listed well is denied for the following reasons(s):

High Fluid Level

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 11/04/2026.

This deadline does NOT override any compliance deadline given to you in any Commission Order.

You may contact me if you have any questions.

Sincerely,
SHANE JONES
KCC DISTRICT 4