

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FOR
ACU-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator's License # 9860
Name: Castle Resources, Inc.
Address 1200 East 27th # C

City/State/Zip Hays, Kansas 67601

Purchaser: _____

Operator Contact Person: Jerry Green

Phone (913) 625-5155

Contractor's Name: Discovery Drilling, Inc.

License: 31548

Wellsite Geologist: Jerry Green

Designate type of completion
 New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.
 Gas EMHR SIGW
 Dry Other (Core, WSV, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBID
 Conningled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

9/17/96 9/24/96 9/25/96
Spud Date Date Reached ID Completion Date

API NO. 15- 051-24937 0000

County Elli

COPY

-NW -NE -NW Sec. 26 Twp. 11S Rge. 19 X W

330 feet from S (circle one) Line of Section

1650 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corners
NE, SE, NW or SW (circle one)

Lease Name Vine Well # 9

Field Name Solomon

Producing formation Arbuckle

Elevation: Ground 2101 KB 2109

Total Depth 3800 PBID _____

Amount of Surface Pipe Set and Cemented at 213.23 feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ feet

If Alternate II completion, cement circulated from 3800'

feet depth to Surface w/ 310 ex cmt.

Drilling Fluid Management Plan AH-2, 3-12-98 V.C.
(Data must be collected from the Reserve file) OK'd per Dist. 4

Chloride content 29,000 ppm fluid volume 2800 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. Twp. S. Rng. E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on slide two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature _____

Title President Date 1-17-97

Subscribed and sworn to before me this 17th day of January, 19 97.

Notary Public KATHERINE BRAY

Date Commission Expires 6-19-2000

K.C.C. OFFICE USE ONLY		
<input checked="" type="checkbox"/>	Letter of Confidentiality Attached	
<input checked="" type="checkbox"/>	Wireline Log Received	
<input checked="" type="checkbox"/>	Geologist Report Received	
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SRI/Rep
<input checked="" type="checkbox"/>	KGS	<input type="checkbox"/> Plug
		<input checked="" type="checkbox"/> NGPA
		<input type="checkbox"/> Other (Specify)

Form ACU-1 (7-91)

KATHERINE BRAY
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 6-19-2000

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests at interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached and hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach copy of log if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

List All E-Logs Run

Log	Formation (Top), Depth and Datum	Top	Datum
<input checked="" type="checkbox"/>	Topeka	3055	-946
	Heebner	3280	-1171
	L-KC	3322	-1213
	Arbuckle	3604	-1495
	RTD	3800	-1691

*Dual Ind., Gamma Ray Neut,
 Comp. Density Neutron, Micro, Temp. Log.*

CASING RECORD New 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
Surface Pipe	12 1/4	8 5/8	20	213.23	60/40Poz	135	2%Gel&3%C
Production St.	7 7/8	5 1/2	14	3791	Midco	310	

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 ID				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plug: Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
4 shots	3672-75 H2O 1% oil	none
4 shots	3642-45 H2O 1% oil	
4 shots	3616-5 - 18.5 H2O 3% oil	
4 shots	3604.5 - 06.5 10bbl 100% oil	

LINING RECORD Size 2 7/8 Set At 3600 Packer At none Liner Run Yes No

Date of first, Reported Production, SW or Inf. _____ Producing Method Flowing Pumping Gas Lift Other (Explain): _____

Estimated Production Per 24 hours Oil 40 Bbls. Gas 25 Mcf Water 25 Bbls. Gas-Oil Ratio _____ Crd _____

Disposition of Gas: vented sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval 361'
3675'