

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

COPY

API NO. 15- 063-21441

County Gove

C - SW - NE - NE Sec. 1 Twp. 15S Rge. 30 X W

Operator: License # 9860

Name: Castle Resources, Inc.

Address 1200 E. 27th St., Suite C

City/State/Zip Hays, KS 67601

Purchaser: _____

Operator Contact Person: Jerry Green

Phone (913) -625-5155

Contractor: Name: Emphasis Oil Operations

License: 8241

Wellsite Geologist: Jerry Green

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover

☐ Oil ☐ SWD ☐ SIOV ☐ Temp. Abd.

☐ Gas ☐ ENHR ☐ SIGW

☒ Dry ☐ Other (Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SWD

☐ Plug Back ☐ PBD

☐ Commingled ☐ Docket No. _____

☐ Dual Completion ☐ Docket No. _____

☐ Other (SWD or Inj?) ☐ Docket No. _____

10/3/92 10/9/92 10-10-92
Spud Date Date Reached TD Completion Date

4290 Feet from S (circle one) Line of Section

990 Feet from E (circle one) Line of Section

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

Lease Name Zie Well # 1

Field Name Lundgren

Producing Formation _____

Elevation: Ground 2645' KB 2650'

Total Depth 4335' PBDT _____

Amount of Surface Pipe Set and Cemented at 214 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 12-1 P-1-11
(Data must be collected from the Reserve Pit)

Chloride content 8200 ppm Fluid volume 220 bbls

Dewatering method used Air Dry & Backfill

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, 200 Colorado Derby Building, 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 side 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 Trey L. Williams

Title Production Superintendent Date 12-2-92

Subscribed and sworn to before me this 2nd day of December 19 92.

By Public Chris Schumacher

Date Commission Expires 5-8-96

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



Form ACO-1 (7-91)

COMMISSION

Operator Name Castle Resources, Inc. Lease Name Zie Well # 1
 Sec. 1 Twp. 15S Rge. 30 ☐ East County Gove ☒ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests given 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 during test. Attach extra sheet 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: Radiation Guard Log

☒ Log Formation (Top), Depth and Datums ☐ Sample

Name	Top	Datum
Anhydrite	2054	- 83
Heebner	3663	-1013
Lansing	3702	-1052
Stark Shale	3943	-1293
Base Kansas City	4014	-1364
Pawnee	4136	-1486
Myrich Station	4172	-1522
Fort Scott	4196	-1546
Mississippi Lime	4300	-1650
Warsaw	4316	-1666
RTD	4331	-1681

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	12 1/4	8 5/8	20#	216'	60/40 Poz	140	2% Gel, 3% dc

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				

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SVD or Inj.				
Producing Method				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

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 _____