

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

Operator: License # 9860

Name: Castle Resources Inc.

Address 1200 E. 27, Suite C

City/State/Zip Hays, KS 67601-2120

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

- X New Well Re-Entry Workover Oil SWD SIOW 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 PSTD Commingled Docket No. Dual Completion Docket No. Other (SWD or Inj?) Docket No.

4/17/92 Spud Date 4/24/92 Date Reached TD 5/15/92 Completion Date

API NO. 15- 063-21,428

County Gove

NE SW NE Sec. 1 Twp. 15s Rge. 30

3630 Feet from SN (circle one) Line of Section

1650 Feet from EW (circle one) Line of Section

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

Lease Name Ziegenbalg Well # 2

Field Name

Producing Formation Myrick Station

Elevation: Ground 2628 KB 2633

Total Depth 4330 (Rig & Log) PBTD 4318

Amount of Surface Pipe Set and Cemented at 204 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set Feet

If Alternate II completion, cement circulated from TD

feet depth to surface w/ 530 ex cat.

Brilling Fluid Management Plan ALT 2 9/24/92 JAH (Data must be collected from the Reserve Pit)

Chloride content 12,000 ppm Fluid volume 300 bbls

Dewatering method used Allowed to 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 John D. McFarland

Title Chief Operating Officer Date 8/5/92

Subscribed and sworn to before me this 5 day of August 1992

Notary Public Chris Schumacher AUG

Date Commission Expires 5-8-96

K.C.C. OFFICE USE ONLY F Letter of Confidentiality Attached Wireline Log Received Geologist Report Received Distribution KCC SVD/Rep NGPA KGS Plug Other (Specify)

CHRIS SCHUMACHER State of Kansas My Appl. Exp. 5-8-96

Operator Name Castle Resources Inc. Lease Name Ziegenbalg Well # 2

Sec. 1 Top. 15s Rge. 30 East West County Gove

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	2035	+ 586 (sample)
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	3646	-1013
List All E.Logs Run:		Lansing-KC	3684	-1051
Radiation guard, Correlation, Sonic cement bond, & Seismic spectrum		Stark Shale	3926	-1293
		B-KC	3998	-1365
		Pawnee	4122	-1489
		Myrick Station	4156	-1523
		Fort Scott	4180	-1547
		Mississippi	4282	-1649
		Warsaw	4314	-1681
		TD	4330	-1697

CASING RECORD							
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	204	60/40 Poz	135	2% gel 3% cc
Production	7 7/8	4 1/2	10.5	4328	65/35, EA-2, common	530	9% gel 5# gilsonite 1/8# celloflake

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth
4	4156-4164 Myrick Station	500 gal 15% HCL acid 2500 gal 20% FE acid
	Plug at 4318	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
		2 3/8	4302					
Date of First, Resumed Production, SMD or Inj.			Producing Method					
5/15/92			<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
		15				0		36

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	<u>4156-4164</u>
(If vented, submit ACD-18.)	<input type="checkbox"/> Other (Specify) _____	