

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-4
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 31021
Name: Castelli Exploration, Inc.
Address: 6908 NW 112th Street
City/State/Zip: Oklahoma City, OK 73162
Purchaser: Lumen Energy
Operator Contact Person: Thomas P. Castelli
Phone: (405) 722/5511 ext. 1
Contractor: Name: _____
License: _____
Wellsite Geologist: _____

Designate Type of Completion:
____ 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: Castelli Exploration, Inc.

Well Name: Seibert #1-31
Original Comp. Date: 09/08/98 Original Total Depth: 4300
____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
____ Commingled _____ Docket No. _____
____ Dual Completion _____ Docket No. _____
____ Other (SWD or Enhr.?) _____ Docket No. _____

<u>04/022/02</u>	<u>09/07/98</u>	<u>05/07/02</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 185-23082-000
County: Stafford
____ SE SE Sec. 31 Twp. 24 S. R. 15 East West
660' feet from (S) / N (circle one) Line of Section
660' feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Seibert Well #: 1-31
Field Name: Farmington
Producing Formation: Tarkio Lime
Elevation: Ground: 2047 Kelly Bushing: 2055
Total Depth: 4300 Plug Back Total Depth: 3100
Amount of Surface Pipe Set and Cemented at 334.08 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 WDEH 6-26-02
(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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
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 of 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: [Signature]
Title: President Date: 6/6/02
Subscribed and sworn to before me this 6th day of June
192002
Notary Public: [Signature]
Date Commission Expires: February 10, 2005

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

