

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

11-7s-21w
COPY

API NO. 15- 065-22,573-0101

County Graham

C - NE - NW - SW Sec. 11 Twp. 7s Rge. 21 X E

2310 Feet from S/X (circle one) Line of Section

990 Feet from E/XW (circle one) Line of Section

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

Lease Name Napue Well # 1

Field Name _____

Producing Formation Lansing

Elevation: Ground 2138 KB 2147

Total Depth 3711 PBSD 3620

Amount of Surface Pipe Set and Cemented at 271 Feet

Multiple Stage Cementing Collar Used? X Yes _____ No

If yes, show depth set 1729 Feet

If Alternate II completion, cement circulated from 1729

feet depth to Surface w/ 435 sx cmt.

Drilling Fluid Management Plan 6-17-99
(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume NA bbls

Dewatering method used NA

Location of fluid disposal if hauled offsite:

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

Operator: License # 9860

Name: Castle Resources, Inc

Address 1200 E. 27th.

Suite 'C'

City/State/Zip Hays, KS 67601

Purchaser: _____

Operator Contact Person: Terry Williamson

Phone (913) 625-5155

Contractor: Name: Allied Cementing

License: NA

Wellsite Geologist: _____

Designate Type of Completion

____ New Well ____ Re-Entry X Workover

____ Oil ____ SWD ____ SIOW ____ Temp. Abd.

____ Gas ____ ENHR ____ SIGW

____ Dry X Other (Core, WSW, Expl., Cathodic, etc)

Plug & Abandon

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

Operator: Castle Resources, Inc

Well Name: Napue #1

Comp. Date 6-04-90 Old Total Depth 3711

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

X Plug Back Plug & Abandon PBSD

____ Commingled Docket No. _____

____ Dual Completion Docket No. _____

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

5-28-93

Spud Date _____ Date Reached TD _____ Completion Date _____

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 Terry Williamson

Title Production Superintendent Date 6-14-93

Subscribed and sworn to before me this 14th day of June

9 93.

Notary Public Chris Schumacher

5-8-93



RECEIVED

STATE CORPORATION COM

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received

JUN 16 1993

Distribution
____ KCC _____ SWD/Rep
X KGS _____ Plug
Wichita
____ Other (Specify)

Operator Name Castle Resources Inc.

Lease Name Napue

Well # 1

NE NW SW

East

County Graham

Sec. 11 Twp. 7s Rge. 21

West

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 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 Sample
Name Top Datum

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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

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

TUBING RECORD Size Set At Packer At Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. Producing Method Flowing Pumping Gas Lift Other (Explain)

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 _____