

01 ORIGINAL

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. 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 Workover

Oil SWD SLOW Temp. Abd.

Gas ENHR SIGW

Dry 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

Plug Back Plug & Abandon PBDT

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

5-28-93

Spud Date _____ Date Reached TD _____ Completion Date _____

API NO. 15- 065-22,573

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 EW (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 PBDT 3620

Amount of Surface Pipe Set and Cemented at 271 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1729 Feet

If Alternate II completion, cement circulated from 1729

feet depth to Surface w/ 435 sx cnt.

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. _____

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, 19 93.

Notary Public Chris Schumacher

5-8-93

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

RECEIVED STATE CORPORATION COMMISSION

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Geologist Report Received

JUN 16 1993
JUN 16 1993

CONSERVATION DIVISION
Wichita, Kansas

Distribution

KCC SWD/Rep

KGS Plug Other

(Specify)

SIDE TWO

Operator Name Castle Resources Inc. Lease Name Napue Well # 1
 NE NW SW East
 Sec. 11 Twp. 7s Rge. 21 West
 County Graham

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 <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.) List All E.Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum
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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
<input type="checkbox"/> Perforate	Top Bottom			
<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, SWD or Inj.		Producing Method <input type="checkbox"/> Flowing <input 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

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