For KCC Use:	5.19.05					
District #	4					

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

OCT 13 2005

Form C-1 December 2002

District # SGA? Yes X No	7		NOTICE	OF IN	ITENT T	O DRILL		Form must be S	laned
		Must be	approved by I	KCC five	e (5) days prid	or to commend	ing <b>KeCC</b> W	ICHMAanks must be	·······································
Expected Spud Date	November	<b>5</b> ,	2005		Spot.	120'Nof			East
Expected Spud Date	month	day	year			NW/4	Sec. 26	<sub>/p.</sub> 9 S. R. 26 ✓	West
	9860			6	1200			✓ N / S Line of Section	
OPERATOR: License# _ CASTLE RES	SOURCES INC.				330		ļ	E / ✓ W Line of Section	
Address: PO Box 8			-1) - 2/		Is SECTI		gularirregul		
	enchen, KS 67667					(Note: Loca	ate well on the Section	n Plat on reverse side)	
Contact Person:	Jerry Green				County:	Charidan	ate wen on the Section	ii i iai on reverse side)	
Phone: (785) 625-51	155	_/				ame: ALVIN		Well #: 1	
	33237	V			Field Na	· · · ildoot			
CONTRACTOR: License	e#33237_ N DRILLING					Prorated / Spa		Yes	<b>√</b> No
Name: ANDERSO	IN DIVIELING				Target Fo	ormation(s): B			
Well Drilled For:	Well Class.	: Tyr	e Equipment:		Nearest	Lease or unit b	oundary: 330'	,	
✓ Oil Enh	Rec Infield	_	Mud Rotary		Ground S	Surface Elevation	n: 2620' est		t MSL
Gas Stor	<u> </u>	<u> </u>	Air Rotary			ell within one-qu		Yes	
	oosal Vildca	at 🗀	Cable				within one mil-	Yes [	<b>√</b> No
Seismic; #	of Holes Other		_			bottom of fresh		<u> </u>	
Other							ble water: 1400'		
					Surface i	Pipe by Alternat	te: 1 2	220 ZSO'Min	
If OWWO: old well infor							pe required:n	/a	
Operator: Well Name:						d Total Depth:			
Original Completion		Original To	stal Deoth:			n at Total Dept			
Original Completion	Date.	_Onginal ic				ource for Drilling			
Directional, Deviated or	Horizontal wellbore	?	Yes	<b>√</b> No	W	ell 🗸 Farm	Pond Other		
If Yes, true vertical depth	h:				DWR Pe	mit #:			
Bottom Hole Location:						(No	te: Apply for Permit	vith DWR 🔝 )	
KCC DKT #:					Will Core	es be taken?		Yes	<b>√</b> No
					If Yes, p	roposed zone: .			
				AFF	FIDAVIT				
The undersigned hereb	y affirms that the d	Irilling, com	pletion and e	ventual p	olugging of th	is well will com	ply with K.S.A. 55	et. seq.	
It is agreed that the follo	owing minimum red	quirements	will be met:						
1. Notify the approp	riate district office	prior to sp	oudding of well	II;					
2. A copy of the app									
					•	•	the top; in all case	s surface pipe <b>shall be se</b>	t
	isolidated materials hole, an agreemer						and placement is	necessary prior to plugg	ina:
5. The appropriate of								necessary prior to plays	<b></b> ,
		, ,						ithin 120 days of spud dat	
								ct 3 area, alternate II cementing	
I hereby certify that the					1	<b>~</b> /		mice prior to any comentin	y.
	_	Heleili ale	liue and to ti	ne best	or my knowie	uge and byller.			
Date: 10-11-05	Signature of	Operator	or Agent:		MM	/ 11/14	/ Title: F	resident	
		•	•			Y			
For KCC Use ONLY					Rememb		- (fa CDD 4) with	latest to Delle	
120	-21146	.00-	$\alpha$	/	/		n (form CDP-1) with ACO-1 within 120 (		
API # 15 - 1	.,,				1	•		field proration orders;	6
Conductor pipe require	20		_ feet		1	•		prior to workover or re-entry	
Minimum surface pipe	required 25	<u> </u>	feet per Alt.	<b>S</b> ②	1		t (CP-4) after plugg		
Approved by:	K10.14:0,	2			- Obtain	written approva	al before disposing	or injecting salt water.	
This authorization expi	res: 4-14-00	6			1		•	d expiration date) please	~
(This authorization void	if dnlling not started	within 6 mor			r		and return to the a	garess delow.	
0-14 4-1			afference	<b>&gt;</b> \			Permit Expired		14
Spud date:	Agent: _				Signatu	re of Operator of	Date:		6
	Mail to: KC	C - Conec	vetion Divisi	lon 120	S Market	Room 2079 V	Vichita. Kansas	87202	I

## RECEIVED 0CT 1 3 2005 KCC WICHITA

## IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the Intended well is In a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 1							_ Lo	cation of Well: (	County:	Snendan	rot———			
Operator:		LE RESO	URCES IN	IC.				200		feet from	/N/ s	Line of Section		
Lease:A	LVIN						3;	30		feet from	E / 🗸 V	V Line of Section		
Well Num				****			_ Se	c. <u>26</u> Tw	<sub>/p. 9</sub>	S. R. 26		East ✓ Wes		
Field: W	ildcat						_							
Number	f Aaron at	ributable.	to well:				Is	Section: F	Regular or	Irregul	ar			
					1/4		-							
QIN/QI	TR / QTR / QTR of acreage: NW/4						If Section is irregular, locate well from nearest corner boundary.							
							Se	ection corner use	d: NE	NW	SE SW			
							PLAT							
		•	(Show loca					acreage for pror e or unit bounda	-	ced wells.)				
				(Snov	v rootage	to the nea	rest least	e or unit bounda	ry line.)					
		-			1	*******								
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				•			•		SEWAR	RD CO.				

## in plotting the proposed location of the well, you must show:

- The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
- 2. The distance of the proposed drilling location from the section's south / north and east / west.

NOTE: in all cases locate the spot of the proposed drilling locaton.

- 3. The distance to the nearest lease or unit boundary line.
- If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).