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KANSAS CORPORATION COMMISSION

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OIL & GAS CONSERVATION DIVISION

APR 05 2006

Form C-1

December 2002

Form must be Typed

Form must be Signed

blanks must be Filled

For KCC Use: 4-12-06
Effective Date: _____
District # 4
SGA? Yes No

NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well work

CONSERVATION DIVISION
WICHITA, KS

Expected Spud Date April 11, 2006
month day year

OPERATOR: License# 9860
Name: Castle Resources, Inc.
Address: P.O. Box 87
Schoenchen, KS 67667
City/State/Zip:
Contact Person: Jerry Green
Phone: (785) 625-5155

CONTRACTOR: License# 33237
Name: Anderson Drilling

Spot East
NESW SW SW Sec. 1 Twp. 13 S. R. 21 West
525 feet from N / S Line of Section
500 feet from E / W Line of Section
Is SECTION Regular Irregular?

(Note: Locate well on the Section Plat on reverse side)

County: Trego
Lease Name: Armbrister Well #: 1
Field Name: Ellis Southwest

Is this a Prorated / Spaced Field? Yes No
Target Formation(s): Arbuckle

Nearest Lease or unit boundary: 500'
Ground Surface Elevation: 2175 est. feet MSL

Water well within one-quarter mile: Yes No
Public water supply well within one mile: Yes No

Depth to bottom of fresh water: 150'
Depth to bottom of usable water: 800'

Surface Pipe by Alternate: 1 2
Length of Surface Pipe Planned to be set: 200'

Length of Conductor Pipe required: none
Projected Total Depth: 3,900'

Formation at Total Depth: Arbuckle
Water Source for Drilling Operations:

Well Farm Pond Other _____
DWR Permit #: _____

(Note: Apply for Permit with DWR)

Will Cores be taken? Yes No
If Yes, proposed zone: _____

Well Drilled For: Oil Gas OWWO Seismic; # of Holes Other
 Enh Rec Storage Disposal Other
Well Class: Infield Pool Ext. Wildcat
Type Equipment: Mud Rotary Air Rotary Cable

If OWWO: old well information as follows:
Operator: _____
Well Name: _____
Original Completion Date: _____ Original Total Depth: _____

Directional, Deviated or Horizontal wellbore? Yes No

If Yes, true vertical depth: _____

Bottom Hole Location: _____

KCC DKT #: _____

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date.
Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: April 5, 2006 Signature of Operator or Agent: Donna Thanda Title: Agent

For KCC Use ONLY
API # 15 - 195-22352-00-00
Conductor pipe required None feet
Minimum surface pipe required 200 feet per Alt. X2
Approved by: Rut 4-7-06
This authorization expires: 10-7-06
(This authorization void if drilling not started within 6 months of effective date.)
Spud date: _____ Agent: _____

Remember to:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed;
- Obtain written approval before disposing or injecting salt water.
- If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.

Well Not Drilled - Permit Expired
Signature of Operator or Agent: _____
Date: _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

1
13
214

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

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

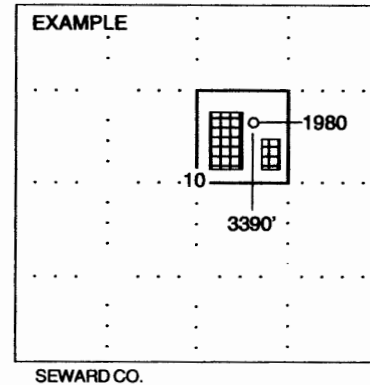
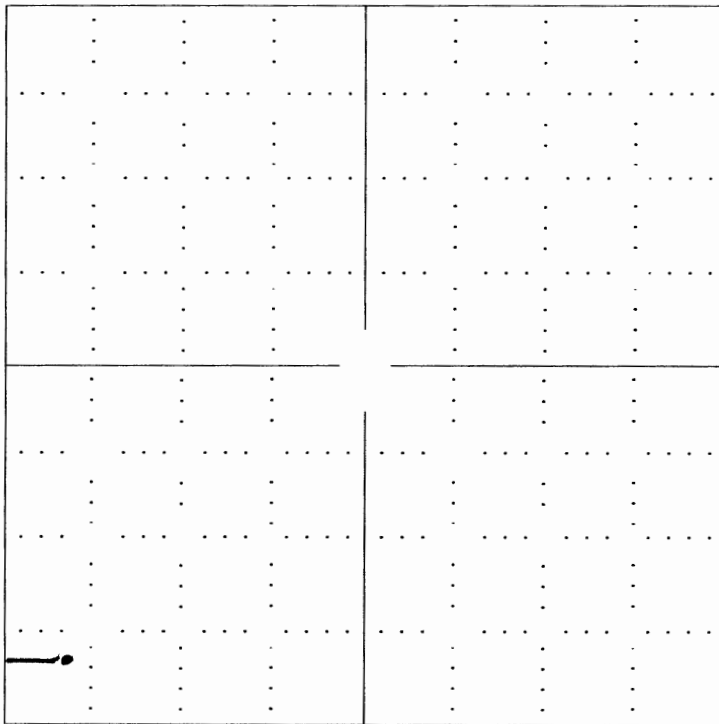
If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please 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. 15 - 195-22352-00-00
 Operator: Castle Resources, Inc.
 Lease: Armbrister
 Well Number: 1
 Field: Ellis Southwest
 Number of Acres attributable to well: _____
 QTR / QTR / QTR of acreage: NESW - SW - SW

Location of Well: County: Trego
525 feet from N / S Line of Section
500 feet from E / W Line of Section
 Sec. 1 Twp. 13 S. R. 21 East West
 Is Section: Regular or Irregular
If Section is Irregular, locate well from nearest corner boundary.
 Section corner used: NE NW SE SW

PLAT

*(Show location of the well and shade attributable acreage for prorated or spaced wells.)
 (Show footage to the nearest lease or unit boundary line.)*

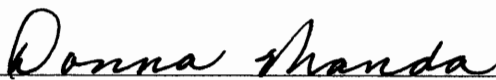


NOTE: In all cases locate the spot of the proposed drilling location.

In plotting the proposed location of the well, you must show:

1. 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.
3. The distance to the nearest lease or unit boundary line.
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).

Submit in Duplicate

Operator Name: Castle Resources, Inc.		License Number: 9860
Operator Address: P.O. Box 87, Schoenchen, KS 67667		
Contact Person: Jerry Green		Phone Number: (785) 625 - 5155
Lease Name & Well No.: Armbrister #1		Pit Location (QQQQ): NE - SW - SW - SW
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 3,600 (bbbls)	Sec. 1 Twp. 13 R. 21 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 525 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 500 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Trego County
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used? native clay
Pit dimensions (all but working pits): 60 Length (feet) 60 Width (feet) N/A: Steel Pits Depth from ground level to deepest point: 5 (feet)		
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.
Distance to nearest water well within one-mile of pit 2817 feet Depth of water well 40 feet		Depth to shallowest fresh water 26 feet. ^① Source of information: KH KGS _____ measured _____ well owner _____ electric log _____ KDWR
Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: drilling mud Number of working pits to be utilized: 1 Abandonment procedure: air dry and backfill _____ Drill pits must be closed within 365 days of spud date.
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		
April 5, 2006 Date		 Signature of Applicant or Agent

15-195-22352-00-00

KCC OFFICE USE ONLY			
Date Received: 4/5/06	Permit Number: _____	Permit Date: 4/5/06	Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202