

For KCC Use: 3-17-07  
 Effective Date: 4  
 District #: 4  
 SGA?  Yes  No

KANSAS CORPORATION COMMISSION  
 OIL & GAS CONSERVATION DIVISION

Form C-1  
 December 2002  
**Form must be Typed**  
**Form must be Signed**  
**All blanks must be Filled**

**NOTICE OF INTENT TO DRILL**

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

Expected Spud Date March 16 2007  
month day year

OPERATOR: License# 31021  
 Name: Castelli Exploration, Inc.  
 Address: 6908 N.W. 112th St.  
 City/State/Zip: Oklahoma City, OK 73162  
 Contact Person: Tisha Love  
 Phone: 405-722-5511

CONTRACTOR: License# 30606  
 Name: Murfin Drilling Company, Inc.

|   |   |  |
|---|---|--|
| Well Drilled For:   | Well Class:                                 | Type Equipment:                                |
| <input checked="" type="checkbox"/> Oil <input checked="" type="checkbox"/> Enh Rec | <input checked="" type="checkbox"/> Infield | <input checked="" type="checkbox"/> Mud Rotary |
| <input type="checkbox"/> Gas <input type="checkbox"/> Storage                       | <input type="checkbox"/> Pool Ext.          | <input type="checkbox"/> Air Rotary            |
| <input type="checkbox"/> OWWO <input type="checkbox"/> Disposal                     | <input type="checkbox"/> Wildcat            | <input type="checkbox"/> Cable                 |
| Seismic: # of Holes   | Other                                       |  |
| <input type="checkbox"/> Other  |   |  |

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 #: \_\_\_\_\_

Spot: \_\_\_\_\_ East  
 S/2 NE SE Sec. 11 Twp. 12 S. R. 22  West  
1450 1550 per operator feet from  N /  S Line of Section  
610 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: Adams Well #: 4  
 Field Name: Sherfick Northwest  
 Is this a Prorated / Spaced Field?  Yes  No  
 Target Formation(s): Arbuckle  
 Nearest Lease or unit boundary: 610'  
 Ground Surface Elevation: 2326 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: 120  
 Depth to bottom of usable water: 950  
 Surface Pipe by Alternate:  1  2  
 Length of Surface Pipe Planned to be set: 225'  
 Length of Conductor Pipe required: N/A  
 Projected Total Depth: 4175  
 Formation at Total Depth: Arbuckle  
 Water Source for Drilling Operations:  
 Well  Farm Pond Other Haul  
 DWR Permit #: \_\_\_\_\_  
 (Note: Apply for Permit with DWR)   
 Will Cores be taken?  Yes  No  
 If Yes, proposed zone: \_\_\_\_\_

**AFFIDAVIT**

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

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

**MAR 12 2007**

**CONSERVATION DIVISION WICHITA, KS**

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 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: 3/19/07 Signature of Operator or Agent: Tisha Love Title: Business Operations Manager

|  |              |
|--|--------------|
| <b>For KCC Use ONLY</b>  |              |
| API # 15 - <u>195-22441-0000</u>   |              |
| Conductor pipe required <u>None</u> feet   |              |
| Minimum surface pipe required <u>200</u> feet per Alt. <u>YO 2</u>                                 |              |
| Approved by: <u>PH 3-12-07</u>   |              |
| This authorization expires: <u>9-12-07</u>   |              |
| <small>(This authorization void if drilling not started within 6 months of approval date.)</small> |              |
| 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: \_\_\_\_\_

11  
12  
22W

**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 - 195-22441-000  
Operator: Castelli Exploration, Inc.  
Lease: Adams  
Well Number: 4  
Field: Sherfick Northwest  
Number of Acres attributable to well: \_\_\_\_\_  
QTR / QTR / QTR of acreage: S/2 - NE - SE

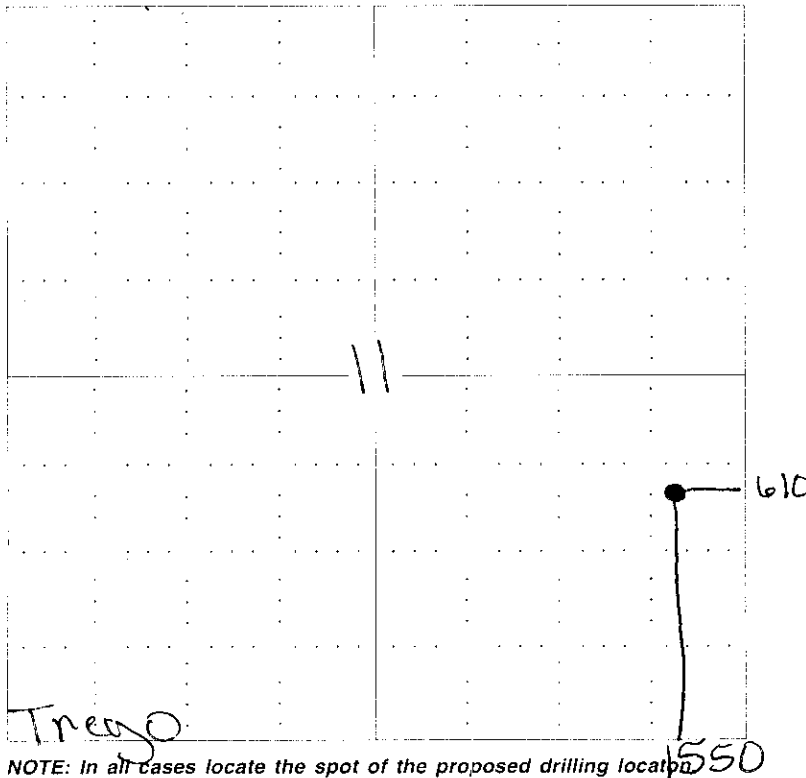
Location of Well: County: Trego  
~~1450~~ 1550 feet from  N /  S Line of Section  
610 feet from  E /  W Line of Section  
Sec. 11 Twp. 12 S. R. 22 East  West

Is Section:  Regular or  Irregular

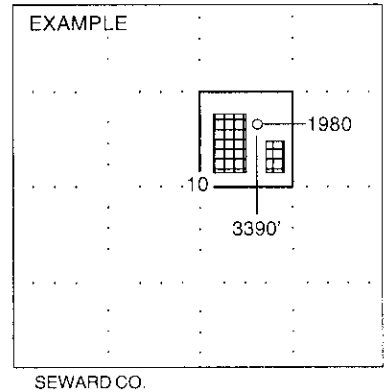
If Section is Irregular, locate well from nearest corner boundary.  
Section corner used:  NE  NW  SE  SW

**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.)*



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**WICHITA, KS**



**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).

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**APPLICATION FOR SURFACE PIT**

Form CDP-1  
April 2004  
Form must be Typed

Submit in Duplicate

|   |  |  |  |
|---|--|--|--|
| Operator Name: <b>Castelli Exploration, Inc.</b>  |  | License Number: <b>31021</b>   |  |
| Operator Address: <b>6908 N.W. 112th St., Oklahoma City, OK 73162</b>   |  |  |  |
| Contact Person: <b>Tisha Love</b>   |  | Phone Number: ( <b>405</b> ) <b>722 - 5511</b>   |  |
| Lease Name & Well No.: <b>Adams #4</b>  |  | Pit Location (QQQQ):<br><b>S/2 NE SE</b>   |  |
| Type of Pit:<br><input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit<br><input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit<br><input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit<br>(If WP Supply API No. or Year Drilled)         |  | Pit is:<br><input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing<br>If Existing, date constructed: _____<br>Pit capacity: <b>3500</b> (bbls)  |  |
| Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | Chloride concentration: _____ mg/l<br>(For Emergency Pits and Settling Pits only)  |  |
| Is the bottom below ground level?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |  | Artificial Liner?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |
| How is the pit lined if a plastic liner is not used?<br><b>Native &amp; Fresh Mud</b>   |  |  |  |
| Pit dimensions (all but working pits): <b>80'</b> Length (feet) <b>60'</b> Width (feet)    N/A: Steel Pits<br>Depth from ground level to deepest point: <b>4'</b> (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.<br><b>Haul free fluids as needed</b>   |  |
|   |  | <b>RECEIVED</b><br><b>KANSAS CORPORATION COMMISSION</b><br><b>MAR 12 2007</b><br><b>CONSERVATION DIVISION</b><br><b>WICHITA, KS</b>  |  |
| Distance to nearest water well within one-mile of pit<br><b>3591</b> feet    Depth of water well <b>102</b> feet  |  | Depth to shallowest fresh water <b>72</b> feet.<br>Source of information: <b>①</b><br>_____ measured _____ well owner _____ electric log _____ KDWR  |  |
| <b>Emergency, Settling and Burn Pits ONLY:</b><br>Producing Formation: _____<br>Number of producing wells on lease: _____<br>Barrels of fluid produced daily: _____<br>Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No |  | <b>Drilling, Workover and Haul-Off Pits ONLY:</b><br>Type of material utilized in drilling/workover: <b>Mud cuttings</b><br>Number of working pits to be utilized: <b>1</b><br>Abandonment procedure: <b>Backfill pit with native &amp; fresh mud</b><br>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.   |  |  |  |
| Date: <b>3/19/07</b>  |  | Signature of Applicant or Agent: <b>Tisha Love</b>   |  |

15-195-22441-0200

| KCC OFFICE USE ONLY           |                      |                             |   |
|-------------------------------|----------------------|-----------------------------|---|
| Date Received: <b>3/12/07</b> | Permit Number: _____ | Permit Date: <b>3/12/07</b> | Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |