

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 31021
Name: Castelli Exploration, Inc.
Address: 6908 N.W. 112th Street
City/State/Zip: Oklahoma City, OK 73162

Purchaser: _____
Operator Contact Person: Thomas P. Castelli
Phone: (405) 722-5511

Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Dale Padgett

Designate Type of Completion: **KCC WICHITA**
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

02/18/04 02/27/04 03/13/04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 033-21395-00-00
County: Comanche
SE - SW - SW Sec. 16 Twp. 33 S. R. 16 East West
400' feet from (S) / N (circle one) Line of Section
1000' feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Donna Marie Well #: 1-16
Field Name: Shimer

Producing Formation: Mississippian
Elevation: Ground: 1785' Kelly Bushing: 1798'
Total Depth: 5025' Plug Back Total Depth: 5013'
Amount of Surface Pipe Set and Cemented at 315 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.
ACT I WITH 11-27-06

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 8,500 ppm Fluid volume 348 bbls
Dewatering method used Hauled free fluids as needed
Location of fluid disposal if hauled offsite:
Operator Name: Star Resources
Lease Name: Carrier License No.: 20-9
Quarter NW Sec. 13 Twp. 35 S. R. 16 East West
County: Comanche Docket No.: D27668

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 of 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: Christopher J. Greenlee
Title: Exp/Geo Date: 04-29-04
Subscribed and sworn to before me this 29th day of April,
2004.
Notary Public: Tisha L. Braun

Date Commission Expires: 7/18/05
01011945

OKLAHOMA NOTARY PUBLIC
TISHA L. BRAUN
OKLAHOMA COUNTY
COMM EXP 07-18-2005

KCC Office Use ONLY
Yes Letter of Confidentiality Requested
If Denied, Yes/No Date: _____
RELEASED FROM CONFIDENTIAL
Wireline Log Received _____
Geologist Report Received _____
UIC Distribution _____

✓

X

Operator Name: Castelli Exploration, Inc. Lease Name: Donna Marie Well #: 1-16
 Sec. 16 Twp. 33 S. R. 16 East West County: Comanche

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

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)

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Lansing	4264'	-2466'
Drum	4494'	-2696'
Swope	4602'	-2804'
Pawnee	4840'	-3042'
Miss	4942'	3144'

List All E. Logs Run:
 DIL/CND

RECEIVED
MAY 03 2004
KCC WICHITA

CASING RECORD <input checked="" 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
Conductor		20"		45'			
Surface	17 1/2"	13-3/8"	48#	315'	ServeLite 60/40 Poz	180	6% gel 3% cc
Production	7 7/8"	4 1/2"	16.6#	5017'	AA-2	125	3% cc 3% gel 10% salt 5% gil

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4 spf	Miss 4988'-4990'	250 Gal 15% MCA	
	CIBP @ 5086'	1/2 sx cmt	
4 spf	Miss 4953'-4966	1000 gal 10% MCA w/foamer	

RELEASED FROM CONFIDENTIAL

TUBING RECORD		Size	Set At	Packer At	Liner Run
None					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
04/23/04		<input checked="" 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
		450 MCFD			

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 _____