

ORIGINAL

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 179-20,983 00-00

County Sheridan

NE NE NE Sec. 4 Twp. 9S Rge. 27 East West

4950 Ft. North from Southeast Corner of Section

330 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name Sharon Well # 1

Field Name McFadden NE

Producing Formation D & A

Elevation: Ground 2589' KB 2594'

Total Depth 3990' P8TD

Operator: License # 9860

Name: Castle Resources

Address RR #1, Box 90

City/State/Zip Hays, KS 67601

Purchaser: _____

Operator Contact Person: Jerry Green

Phone (913) -625-5155

Contractor: Name: Emphasis Oil Operations

License: 8241

Wellsite Geologist: Jerry Green

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If OWWO: old well info as follows:

Operator: _____

Well Name: _____

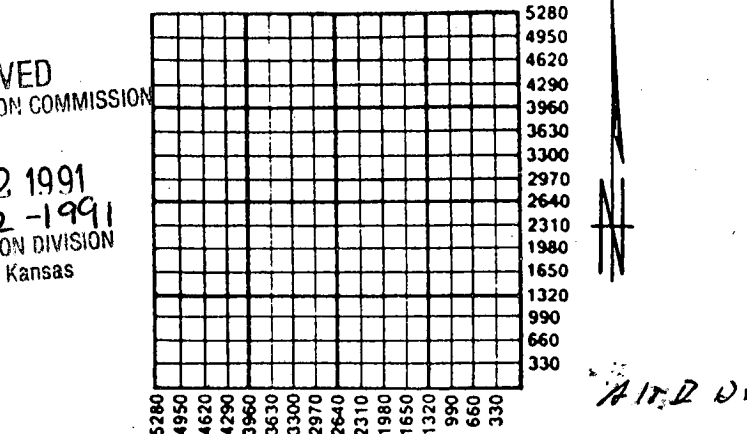
Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

12/27/90 1/4/91 1/4/91

Spud Date Date Reached TD Completion Date



Amount of Surface Pipe Set and Cemented at 253 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.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Jerry Green
Title Owner Date _____

Subscribed and sworn to before me this 30th day of April, 19 91.

Notary Public Deann Meyers

Date Commission Expires 9-13-94

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other (Specify)

DEANN MEYERS
Notary Public - State of Kansas
My Appt Expires 9-13-94

SIDE TWO

Operator Name Castle Resources Lease Name Sharon Well # 1
 Sec. 4 Twp. 9S Rge. 27 East County Sheridan
 West

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 Yes No
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)

Name	Formation Description	
	Top	Bottom
Heebner	3702	-1108
Toronto	3724	-1130
Lansing - , KC	3740	-1146
RTD	3968	-1374
RTD	3993	-1399

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
Surface	13"	8 5/8	22	253	60/40	165	2% cc
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			Amount and Kind of Material Used			Depth
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No			
Size	Set At	Packer At					
Date of First Production	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: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perforation Dually Completed Commingled Other (Specify) D & A

Production Interval _____



ORIGINAL

15-179-20983-00-00

SHARON #1

DST #1: 3700-32

Zone Tested: Toronto

Testing Times: 30-30-10

Rec: 15' mud

IBHP: 185

FP: 33-33

DST #2: 3774-3810

Zone Tested: C, D, E

Rec: 250' water

IBHP: 790

FBHP: 793

FP: 75-109

134-159

DST #3: 3845-3990

Zone Tested: I, I, J, K, 1

Rec: 430 MSW

IBHP: 1234

FBHP: 1165

FP: 151-185 227-252

RECEIVED
STATE CORPORATION COMMISSION

MAY 02 1991

CONSERVATION DIVISION
Wichita, Kansas



INVOICE

HALLIBURTON SERVICES



A Halliburton Company 15-179-20983-00-00

INVOICE NO.	DATE
904602	12/27/1990

WELL LEASE NO./PLANT NAME		WELL/PLANT LOCATION		STATE	WELL/PLANT OWNER	
SHARON 1		SHERIDAN		KS	CASTLE RESOURCES	
SERVICE LOCATION		CONTRACTOR	JOB PURPOSE		TICKET DATE	
OBERLIN		EMPHASIS DRLG	CEMENT SURFACE CASING		12/27/1990	
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.	
151571	JOHN COLLINS			COMPANY TRUCK	07609	

STATE CORPORATION COMMISSION

CASTLE RESOURCES
R R 1 STONEWOOD ESTATES LOT 8
HAYS, KS 67601

DIRECT CORRESPONDENCE TO:
FIRST OKLAHOMA TOWER
210 WEST PARK AVENUE
SUITE 2050
OKLAHOMA CITY, OK 73102-5601

MAY 02 1991
CONSERVATION DIVISION
Wichita, Kansas

PRICE REF. NO.	DESCRIPTION	QUANTITY	U/M	UNIT PRICE	AMOUNT
000-117	MILEAGE	50	MI	2.35	117.50
		1	UNT		
000-118	MILEAGE SURCHARGE-CEMENT-LAND	50	MI	.40	20.00
		1	UNT		
001-016	CEMENTING CASING	255	FT	440.00	440.00
		1	UNT		
030-503	CMTG PLUG LA-11,CP-1,CP-3, TOP	8 5/8	IN	59.00	59.00
		1	EA		
504-308	STANDARD CEMENT	99	SK	6.75	668.25 *
506-105	POZMIX A	66	SK	3.50	231.00 *
506-121	HALLIBURTON-GEL 2%	3	SK	.00	N/C *
509-406	ANHYDROUS CALCIUM CHLORIDE	5	SK	25.75	128.75 *
500-207	BULK SERVICE CHARGE	175	CFT	1.10	192.50 *
500-306	MILEAGE CMTG MAT DEL OR RETURN	372.25	TMI	.75	279.19 *
500-307	MILEAGE SURCHARGE-CEMENT MAT.	372.25	TMI	.10	37.23
INVOICE SUBTOTAL					2,173.42
DISCOUNT-(BID)					423.23-
INVOICE BID AMOUNT					1,750.19
*-KANSAS STATE SALES TAX					50.99
*-DECATUR COUNTY SALES TAX					12.00
INVOICE TOTAL - PLEASE PAY THIS AMOUNT =====>					\$1,813.18

TERMS INVOICES PAYABLE NET BY THE 20TH OF THE FOLLOWING MONTH AFTER DATE OF INVOICE. UPON CUSTOMER'S DEFAULT IN PAYMENT OF CUSTOMER'S ACCOUNT BY THE LAST DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE INVOICE IS DATED, CUSTOMER AGREES TO PAY INTEREST THEREON AFTER DEFAULT AT THE HIGHEST LAWFUL CONTRACT RATE APPLICABLE BUT NEVER TO EXCEED 18% PER ANNUM. IN THE EVENT IT BECOMES NECESSARY TO EMPLOY AN ATTORNEY TO ENFORCE COLLECTION OF SAID ACCOUNT, CUSTOMER AGREES TO PAY ALL COLLECTION COSTS AND ATTORNEY FEES IN THE AMOUNT OF 20% OF THE AMOUNT OF THE UNPAID ACCOUNT.



INVOICE

HALLIBURTON SERVICES

A Halliburton Company

15-179-20983-00-00
15-179-25983-80-20983-00-00

INVOICE NO.	DATE
904582	01/03/1991

WELL LEASE NO./PLANT NAME		WELL/PLANT LOCATION		STATE	WELL/PLANT OWNER	
SHARON 1		SHERIDAN		KS	CASTLE RESOURCES	
SERVICE LOCATION		CONTRACTOR	JOB PURPOSE		TICKET DATE	
OBERLIN		EMPHASIS DRUG. #6	PLUG TO ABANDON		01/03/1991	
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER		SHIPPED VIA	FILE NO.
151571	DOUG ROBERTS					

COMPANY TRUCK RECEIVED
STATE CORPORATION COMMISSION

CASTLE RESOURCES
R R 1 STONEWOOD ESTATES LOT 8
HAYS, KS 67601

DIRECT CORRESPONDENCE TO: **MAY 02 1991**
FIRST OKLAHOMA TOWER
210 WEST PARK AVENUE
SUITE 2050
OKLAHOMA CITY, OK 73102-5601
CONSERVATION DIVISION
Wichita, Kansas

PRICE REF. NO.	DESCRIPTION	QUANTITY	U/M	UNIT PRICE	AMOUNT
000-117	PRICING AREA - MID CONTINENT MILEAGE	50	MI	2.35	117.50
000-118	MILEAGE SURCHARGE-CEMENT-LAND	50	MI	.40	20.00
090-910	MISCELLANEOUS PUMPING JOB	1	TRK	370.00	370.00
030-503	CMTG PLUG LA-11, CP-1, CP-3, TOP	8 5/8	IN	59.00	59.00
090-928	MISCELLANEOUS PUMP JOB-ADD HRS	2	HR	84.00	168.00
504-308	STANDARD CEMENT	114	SK	6.75	769.50
506-105	POZMIX A	76	SK	3.50	266.00
506-121	HALLIBURTON-GEL 2%	4	SK	.00	N/C
507-277	HALLIBURTON-GEL ADDED 4%	5	SK	13.75	68.75
507-210	FLOCELE	48	LB	1.30	62.40
500-207	BULK SERVICE CHARGE	203	CFT	1.10	223.30
500-306	MILEAGE CMTG MAT DEL OR RETURN	432.20	TMI	.75	324.15
500-307	MILEAGE SURCHARGE-CEMENT MAT.	432.20	TMI	.10	43.22
INVOICE SUBTOTAL					2,491.82
DISCOUNT-(BID)					485.72-
INVOICE BID AMOUNT					2,006.10
INVOICE TOTAL - PLEASE PAY THIS AMOUNT					\$2,006.10

TERMS INVOICES PAYABLE NET BY THE 20TH OF THE FOLLOWING MONTH AFTER DATE OF INVOICE. UPON CUSTOMER'S DEFAULT IN PAYMENT OF CUSTOMER'S ACCOUNT BY THE LAST DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE INVOICE IS DATED, CUSTOMER AGREES TO PAY INTEREST THEREON AFTER DEFAULT AT THE HIGHEST LAWFUL CONTRACT RATE APPLICABLE BUT NEVER TO EXCEED 18% PER ANNUM. IN THE EVENT IT BECOMES NECESSARY TO EMPLOY AN ATTORNEY TO ENFORCE COLLECTION OF SAID ACCOUNT, CUSTOMER AGREES TO PAY ALL COLLECTION COSTS AND ATTORNEY FEES IN THE AMOUNT OF 20% OF THE AMOUNT OF THE UNPAID ACCOUNT.