

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 9860  
Name: Castle Resources Inc.  
Address: PO Box 87  
City/State/Zip: Schoenchen, KS 67667  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Jerry Green  
Phone: (785) 625-5155  
Contractor: Name: Landmark Drilling  
License: 33549  
Wellsite Geologist: Jerry Green

Designate Type of Completion:  
 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. \_\_\_\_\_

<u>9/4/06</u>	<u>9/13/06</u>	<u>9/14/06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 083-21519-0000  
County: Hodgeman  
c SW NE Sec. 10 Twp. 21 S. R. 21  East  West  
1980 feet from S N (circle one) Line of Section  
1980 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Sonja Well #: 1  
Field Name: wildcat

Producing Formation: \_\_\_\_\_  
Elevation: Ground: 2149 Kelly Bushing: \_\_\_\_\_  
Total Depth: 4362 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 230 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.

Drilling Fluid Management Plan *ACT 12-1-07*  
(Data must be collected from the Reserve Pit)  
Chloride content 20,000 ppm Fluid volume 0 bbls  
Dewatering method used allowed to dry & backfill  
Location of fluid disposal if hauled offsite:  
Operator Name: Ritchie Exploration  
Lease Name: Sears AP License No.: 4767  
Quarter NW Sec. 6 Twp. 20 S. R. 21  East  West  
County: Ness Docket No.: 11,577

*Hauled All Fluid off*

**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: \_\_\_\_\_  
Title: President Date: 1/17/07  
Subscribed and sworn to before me this 17<sup>th</sup> day of January,  
20 07.  
Notary Public: Katherine Bray  
Date Commission Expires: 7-3-08

KATHERINE BRAY  
NOTARY PUBLIC  
STATE OF KANSAS  
MY APPT. EXPIRES 7-3-08

**KCC Office Use ONLY**  
N Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**JAN 18 2007**

CONSERVATION DIVISION  
WICHITA, KS

Operator Name: Castle Resources Inc. Lease Name: Sonja Well #: 1  
 Sec. 10 Twp. 21 S. R. 21  East  West County: Hodgeman

**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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>3680</td> <td>-1524</td> </tr> <tr> <td>Toronto</td> <td>3698</td> <td>-1542</td> </tr> <tr> <td>Lansing-KC</td> <td>3731</td> <td>-1575</td> </tr> <tr> <td>Base-KC</td> <td>4085</td> <td>-1929</td> </tr> <tr> <td>Fort Scott</td> <td>4242</td> <td>-2086</td> </tr> <tr> <td>Mississippi</td> <td>4323</td> <td>-2167</td> </tr> <tr> <td>RTD</td> <td>4362</td> <td>-2206</td> </tr> </table>	Name	Top	Datum	Heebner	3680	-1524	Toronto	3698	-1542	Lansing-KC	3731	-1575	Base-KC	4085	-1929	Fort Scott	4242	-2086	Mississippi	4323	-2167	RTD	4362	-2206
Name	Top	Datum																							
Heebner	3680	-1524																							
Toronto	3698	-1542																							
Lansing-KC	3731	-1575																							
Base-KC	4085	-1929																							
Fort Scott	4242	-2086																							
Mississippi	4323	-2167																							
RTD	4362	-2206																							

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	12 1/4	8 5/8"	23#	230'	COM	160	3% CC 2% gel

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		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	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	RECEIVED <b>KANSAS CORPORATION COMMISSION</b> <u>JAN 18 2007</u>

# ALLIED CEMENTING CO., INC.

Federal Tax I.D. \_\_\_\_\_

26208

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

Nesscity

DATE <u>9-14-06</u>	SEC. <u>10</u>	TWP. <u>21</u>	RANGE <u>21</u>	CALLED OUT <u>1:30pm</u>	ON LOCATION <u>3:30pm</u>	JOB START <u>4:30pm</u>	JOB FINISH <u>6:00pm</u>
LEASE <u>Sony A</u>	WELL # <u>1</u>	LOCATION <u>Nesscity 14s 15E 1S</u>		COUNTY <u>Hodgeman</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)				<u>1 1/2" E 3/4" ES</u>			

CONTRACTOR Landmark Drilling #2

TYPE OF JOB Rotary Plus

HOLE SIZE 7 7/8 T.D. 4358

CASING SIZE 8 5/8 DEPTH 220

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED

185 60/40 6 1/2" Hal

1/4" # 70 Seal per sq

COMMON	<u>111 Hal</u>	@	<u>10.65</u>	<u>1182.15</u>
POZMIX	<u>74 Hal</u>	@	<u>5.80</u>	<u>429.20</u>
GEL	<u>10 Hal</u>	@	<u>16.65</u>	<u>166.50</u>
CHLORIDE	_____	@	_____	_____
ASC	_____	@	_____	_____
<u>FLO SEAL</u>	<u>N6 #</u>	@	<u>2.00</u>	<u>92.00</u>
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____

EQUIPMENT

PUMP TRUCK CEMENTER MIKE

# 224 HELPER J. W. Johnson

BULK TRUCK

# 341 DRIVER Cody

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

HANDLING 197 Hal @ 1.90 374.30

MILEAGE 197 Hal 09 42 744.66

TOTAL 2988.81

RECEIVED  
KANSAS CORPORATION COMMISSION

REMARKS: JAN 18 2007

CONSERVATION DIVISION  
WICHITA, KS

50 x e 1350'

50 x e 550

50 x 240

20 x 60

15 x RH

Thanks

SERVICE

DEPTH OF JOB	<u>1350</u>		
PUMP TRUCK CHARGE			<u>815.00</u>
EXTRA FOOTAGE	_____	@	_____
MILEAGE	<u>42</u>	@	<u>6.00</u> <u>252.00</u>
MANIFOLD	_____	@	_____
_____	_____	@	_____
_____	_____	@	_____

CHARGE TO: Castle Res

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 1067.00

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL \_\_\_\_\_

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE [Signature]

PRINTED NAME \_\_\_\_\_

# ALLIED CEMENTING CO., INC. 24222

Federal Tax I.D. \_\_\_\_\_

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT: Merri City

DATE <u>9-4-06</u>	SEC. <u>10</u>	TWP. <u>21</u>	RANGE <u>21</u>	CALLED OUT <u>12:30 PM</u>	ON LOCATION <u>4:00 PM</u>	JOB START <u>6:15 PM</u>	JOB FINISH <u>6:45 PM</u>
LEASE <u>Santa</u>		WELL # <u>1</u>		LOCATION <u>Burdett 2<sup>nd</sup>, 1<sup>st</sup>, 2<sup>nd</sup>, 4<sup>th</sup> W 1/2</u>		COUNTY <u>Hodgeman</u>	STATE <u>Ka</u>
OLD OR NEW (Circle one)							

CONTRACTOR Landmark #2

TYPE OF JOB Surface

HOLE SIZE 12 1/4" T.D. 230'

CASING SIZE 8 3/8" DEPTH 230'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 15'

PERFS. \_\_\_\_\_

DISPLACEMENT 13 3/4 bbls

OWNER Same

CEMENT

AMOUNT ORDERED 160 lbs Common

38cc 290 gel

COMMON	<u>160 lbs</u>	@	<u>10.65</u>	<u>1704.00</u>
POZMIX		@		
GEL	<u>3 gal.</u>	@	<u>16.65</u>	<u>49.95</u>
CHLORIDE	<u>S.M.</u>	@	<u>46.60</u>	<u>233.00</u>
ASC		@		

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WICHITA, KS

HANDLING	<u>168 gal.</u>	@	<u>1.90</u>	<u>319.20</u>
MILEAGE	<u>108 mi.</u>	@	<u>4.2</u>	<u>652.04</u>
TOTAL				<u>2941.19</u>

EQUIPMENT

PUMP TRUCK CEMENTER Tom D

# 224 HELPER Tom W

BULK TRUCK

# 342 DRIVER Cody R

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

**REMARKS:**

Ran 230' of 8 3/8" cas. Broke circulation  
mixed hard common, 38cc 290 gel  
released plug. Displaced with fresh #20.

Cement did circulate

SERVICE

DEPTH OF JOB	<u>230'</u>			
PUMP TRUCK CHARGE				<u>85.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>42</u>	@	<u>6.00</u>	<u>252.00</u>
MANIFOLD		@		
		@		
		@		
TOTAL				<u>1067.00</u>

CHARGE TO: Castle Resources

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

<u>1-8 3/8 wooden Plug</u>	@	<u>60.00</u>	<u>60.00</u>	
	@			
	@			
	@			
	@			
TOTAL				<u>60.00</u>

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TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE [Signature]

[Signature]  
PRINTED NAME