

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1  
September 1999  
Form Must Be Typed

**ORIGINAL**

Operator: License # 31021  
Name: Castelli Exploration, Inc.  
Address: 6908 NW 112th Street  
City/State/Zip: Oklahoma City, OK 73162  
Purchaser: Lumen Energy  
Operator Contact Person: Thomas P. Castelli  
Phone: (405) 722/5511 ext. 1  
Contractor: Name: \_\_\_\_\_  
License: \_\_\_\_\_  
Wellsite Geologist: \_\_\_\_\_

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: Castelli Exploration, Inc.

Well Name: Seibert #2-31  
Original Comp. Date: 09/16/98 Original Total Depth: 4300

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>05/03/02</u>                   | <u>09/07/98</u> | <u>5/10/02</u>                          |
| Spud Date or<br>Recompletion Date | Date Reached TD | Completion Date or<br>Recompletion Date |

API No. 15 - 185-23084-0001  
County: Stafford  
   S/2. SW. SW Sec. 31 Twp. 24 S. R. 15  East  West  
330' feet from  N (circle one) Line of Section  
660' feet from  E  W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW  SW  
Lease Name: Seibert Well #: 2-31  
Field Name: Farmington

Producing Formation: Mississippian and Lansing  
Elevation: Ground: 2054 Kelly Bushing: 2062  
Total Depth: 4300 Plug Back Total Depth: 4250  
Amount of Surface Pipe Set and Cemented at 327.81 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**  
(Data must be collected from the Reserve Pit) *6WWD RGR 1/17/08*  
Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ East West  
County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

**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: [Signature] Date: 6/6/02  
Subscribed and sworn to before me this 6th day of June  
Notary: Diana S. Rice  
Date Commission Expires: February 10, 2005

**KCC Office Use ONLY**

Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: Castelli Exploration, Inc. Lease Name: Seibert Well #: 2-31  
 Sec. 31 Twp. 24 S. R. 15 East  West County: Stafford

**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 type="checkbox"/> Yes No<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes No<br><br>Cores Taken Yes No<br>Electric Log Run Yes No<br><i>(Submit Copy)</i><br><br>List All E. Logs Run: | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">Log Name</td> <td style="width:40%;">Formation (Top), Depth and Datum</td> <td style="width:30%;">Sample Datum</td> </tr> <tr> <td colspan="3" style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</td> </tr> <tr> <td colspan="3" style="text-align: center;">JUN 14 2002</td> </tr> <tr> <td colspan="3" style="text-align: center;">KCC WICHITA</td> </tr> </table> | Log Name     | Formation (Top), Depth and Datum | Sample Datum | RECEIVED |  |  | JUN 14 2002 |  |  | KCC WICHITA |  |  |
| Log Name   | Formation (Top), Depth and Datum  | Sample Datum |                                  |              |          |  |  |             |  |  |             |  |  |
| RECEIVED   |   |              |                                  |              |          |  |  |             |  |  |             |  |  |
| JUN 14 2002  |   |              |                                  |              |          |  |  |             |  |  |             |  |  |
| KCC WICHITA  |   |              |                                  |              |          |  |  |             |  |  |             |  |  |

| CASING RECORD <span style="float: right;">New Used</span>                 |                   |                           |                   |               |                |              |                            |
|---|-------------------|---------------------------|-------------------|---------------|----------------|--------------|----------------------------|
| 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                | 327.81        | Pos Mix        | 225          | 2%Gel&3%CC                 |
| Production  | 7 7/8             | 5 1/2                     | 14                | 4288          | Mid Con II     | 105          |                            |
|   |                   |                           |                   |               |                |              |                            |

| ADDITIONAL CEMENTING / SQUEEZE RECORD  |                  |                |             |                            |
|--|------------------|----------------|-------------|----------------------------|
| Purpose:   | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><input type="checkbox"/> Plug Off Zone |                  |                |             |                            |
|  |                  |                |             |                            |

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
| 4              | Lansing 3787-94 & 3812-20   | 1000 Gal 15% NE FE   |       |
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |

| TUBING RECORD                                   |           | Size             | Set At      | Packer At     | Liner Run                                   | Yes      | No                                  |
|---|-----------|------------------|-------------|---------------|---|----------|-------------------------------------|
|   |           | 2 3/8            | 4242        | None          |   |          | <input checked="" type="checkbox"/> |
| Date of First, Resumed Production, SWD or Enhr. |           | Producing Method |             | Flowing       | <input checked="" type="checkbox"/> Pumping | Gas Lift | Other (Explain)                     |
| 05/10/02  |           |                  |             |               |   |          |                                     |
| Estimated Production Per 24 Hours               | Oil Bbls. | Gas Mcf          | Water Bbls. | Gas-Oil Ratio | Gravity                                     |          |                                     |
|   | 0         | 110              | 7           |               |   |          |                                     |

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented  Sold  Used on Lease Open Hole Perf. Dually Comp.  Commingled 4178-4218, 3919-3924, 3812-3820 and 3787-3794  
*(If vented, Sumit ACO-18.)*  Other (Specify)

RECEIVED

JUN 14 2002

TREATMENT REPORT

ORIGINAL



KCC WICHITA

|                            |                |
|----------------------------|----------------|
| Customer ID                | Date           |
| Customer<br>CASTelli Expl. | 5-9-02         |
| Lease<br>Seibert           | Lease No.      |
|                            | Well #<br>2-31 |

|                           |                          |                                    |       |                    |             |
|---------------------------|--------------------------|------------------------------------|-------|--------------------|-------------|
| Field Order #<br>4793     | Station<br>Pratt         | Casing<br>5 1/2                    | Depth | County<br>STAFFORD | State<br>KS |
| Type Job<br>Acid Old Well | Formation<br>Kansas City | Legal Description<br>Sec 31-24-15W |       |                    |             |

| PIPE DATA            |                      | PERFORATING DATA |            | FLUID USED              |  | TREATMENT RESUME |       |                       |
|----------------------|----------------------|------------------|------------|-------------------------|--|------------------|-------|-----------------------|
| Casing Size<br>5 1/2 | Tubing Size<br>2 3/8 | Shots/Ft<br>4    |            | Acid<br>500 PAK 15% NE  |  | RATE             | PRESS | ISIP                  |
| Depth<br>3752        | Depth<br>3752        | From<br>3787     | To<br>3794 | Pre Pad<br>10% Meth.    |  | Max<br>3         | 900   | 5 Min.<br>200         |
| Volume<br>14 1/2     | Volume<br>14 1/2     | From             | To         | Pad                     |  | Min<br>1/4       | 200   | 30 Min.<br>25         |
| Max Press            | Max Press            | From             | To         | Frac                    |  | Avg<br>2 3/4     | 700   | 45 Min.               |
| Well Connection      | Annulus Vol.         | From             | To         |                         |  | MHP Used         |       | Annulus Pressure      |
| Plug Depth<br>3808   | Packer Depth<br>3752 | From             | To         | Flush<br>17 Bbls. WATER |  | Gas Volume       |       | Total Load<br>29 Bbls |

|                                      |                               |                       |
|--------------------------------------|-------------------------------|-----------------------|
| Customer Representative<br>Rick Popp | Station Manager<br>Dave Autry | Treater<br>Jim Strunk |
|--------------------------------------|-------------------------------|-----------------------|

|               |     |    |
|---------------|-----|----|
| Service Units | 113 | 21 |
|---------------|-----|----|

| Time AM | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log                       |
|---------|-----------------|-----------------|--------------|------|-----------------------------------|
| 7:45    |                 |                 |              |      | Arrive on Location                |
|         |                 |                 |              |      | Hold Safety Meeting               |
|         |                 |                 |              |      | Packer Not Set Tbg. @ 3788        |
| 8:19    |                 |                 |              |      | START Pump WATER dn. Tbg. To Load |
| 8:42    |                 |                 | 78           |      | STOP pump                         |
| 8:55    |                 |                 |              |      | START Pump                        |
| 8:57    |                 |                 | 83           |      | Hole Loaded & Circ. OUT ANN. ST   |
| 8:58    |                 |                 |              |      | START Pump Acid down Tbg          |
| 9:02    |                 |                 | 12           | 3    | 500 Acid IN, START WATER          |
| 9:03    |                 |                 | 15           | 3    | Acid on Bottom, STOP, Close ANN.  |
|         |                 |                 |              |      | Pull Tbg. up & Set Packer 3752    |
| 9:11    |                 |                 |              |      | START Pump Slow                   |
| 9:12    |                 | 200             |              | 1/4  | Feeding, speed pump               |
| 9:13    |                 | 700             | 17           | 2    | Feeding, Speed pump               |
| 9:14    |                 | 900             | 20           | 3    | Feeding                           |
| 9:17    |                 | 900             | 29           | 3    | 17 Bbls. WATER down Tbg., STOP    |
|         |                 | 200             |              |      | ISIP                              |
|         |                 | 75              |              |      | 5MPD                              |
|         |                 | 25              |              |      | 30MPD - Close IN Job Complete     |

10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • Phone (620) 672-1201 • Fax (620) 672-5383

RECEIVED

JUN 14 2006

ORIGINAL

TREATMENT REPORT



KCC WICHITA

|                            |                   |
|----------------------------|-------------------|
| Customer ID<br>KCC WICHITA | Date<br>5-1-02    |
| Customer<br>CUSTEWS EXPL.  | Lease No.<br>1-31 |
| Lease<br>SEIBERT           | Well #<br>1-31    |

|                                |                                    |                               |       |                    |              |
|--------------------------------|------------------------------------|-------------------------------|-------|--------------------|--------------|
| Field Order #<br>4745          | Station<br>Pratt, Ks.              | Casing<br>4 1/2               | Depth | County<br>STAFFORD | State<br>Ks. |
| Type Job<br>SQUEEZE - OLD WELL | Formation<br>OLD RETRIEVER - 3100' | Legal Description<br>31-24-15 |       |                    |              |

| PIPE DATA            |                      | PERFORATING DATA          |    | FLUID USED               |            | TREATMENT RESUME |       |                  |
|----------------------|----------------------|---------------------------|----|--------------------------|------------|------------------|-------|------------------|
| Casing Size<br>4 1/2 | Tubing Size<br>2 3/8 | Shots/Ft<br>SQUEEZE PERFS |    | Acid<br>100 SK. COMMON   | 2% CC.     | RATE             | PRESS | ISIP             |
| Depth                | Depth                | From<br>2950              | To | Pro Pad<br>25 SK. COMMON | Max        |                  |       | 5 Min.           |
| Volume               | Volume               | From                      | To | Pad                      | Min        |                  |       | 10 Min.          |
| Max Press            | Max Press            | From                      | To | Frac                     | Avg        |                  |       | 15 Min.          |
| Well Connection      | Annulus Vol.         | From                      | To |                          | HHP Used   |                  |       | Annulus Pressure |
| Plug Depth           | Packer Depth<br>2870 | From                      | To | Flush                    | Gas Volume |                  |       | Total Load       |

|                                    |                              |                       |
|------------------------------------|------------------------------|-----------------------|
| Customer Representative<br>R. POFF | Station Manager<br>D. AUSTRY | Treater<br>K. GORDLEY |
|------------------------------------|------------------------------|-----------------------|

|               |     |    |    |    |  |  |  |  |
|---------------|-----|----|----|----|--|--|--|--|
| Service Units | 107 | 26 | 38 | 20 |  |  |  |  |
|---------------|-----|----|----|----|--|--|--|--|

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log                    |
|------|-----------------|-----------------|--------------|------|--------------------------------|
| 1000 |                 |                 |              |      | ON LOCATION                    |
|      |                 |                 |              |      | PKR - 2870' PERFS - 2950'      |
| 1042 | 500             |                 | 1            |      | PSD ANNULUS                    |
| 1045 |                 | 1200            | 2            | 1    | INT. RATE TUBING 18PM AT 1200' |
|      |                 |                 |              |      | MIX CEMENT                     |
| 1055 |                 | 1200            | 21           | 1    | 100 SK. COMMON 2% C.C.         |
|      |                 | 700             | 5            | 2    | 25 SK. COMMON                  |
|      |                 |                 | 26           |      | SHUT DOWN - WASH OUT LOW       |
| 1105 |                 | 0               | 0            | 1    | START DISP                     |
| 1107 |                 | 100             | 2            | 1    | CATCH PSD - 2661 OUT           |
|      |                 | 750             | 11 1/4       | 1    | 11 1/4 661 OUT - PKR CLEAR     |
| 1115 |                 | 300             |              |      | STOP PUMP - 11 1/4 661 OUT     |
|      |                 |                 |              |      | WAIT 30 MINUTES                |
| 1145 |                 | 800             | 11 1/4       | 1/4  | PS UP TO 800' - SLIGHT BRANK   |
|      |                 |                 |              |      | STAGE DNG                      |
| 1200 |                 | 1000            | 11 1/2       | 1/4  | HELD 1000'                     |
|      |                 |                 |              |      | RELEASE PSD - HELD             |
| 1210 | 400             |                 | 16           | 2    | REVERSE OUT - NO CEMENT        |
|      |                 |                 |              |      | PULL TUBING                    |
| 1230 |                 |                 |              |      | JOB COMPLETE                   |
|      |                 |                 |              |      | THANKS - KEVIN                 |

|                      |
|----------------------|
| API No.              |
| OTC/OCC Operator No. |

**CEMENTING REPORT**  
To Accompany Completion Report

**RECEIVED**

Form 1002C  
Rev. 1996

**OKLAHOMA CORPORATION COMMISSION**  
Oil & Gas Conservation Division  
Post Office Box 52000-2000  
Oklahoma City, Oklahoma 73152-2000  
OAC 165:10-3-4(h)

JUN 14 2004  
**ORIGINAL**  
KCC WICHITA

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

**TYPE OR USE BLACK INK ONLY**

|  |     |     |                      |     |        |         |        |
|--|-----|-----|----------------------|-----|--------|---------|--------|
| *Field Name                            |     |     | OCC District         |     |        |         |        |
| *Operator<br>Castelli Exploration Inc. |     |     | OCC/OTC Operator No. |     |        |         |        |
| *Well Name/No.<br>Enlow 3-10           |     |     | County<br>Canadian   |     |        |         |        |
| *Location                              | 1/4 | 1/4 | 1/4                  | 1/4 | Sec 10 | Twp 13n | Rge 8w |

| Cement Casing Data  | Conductor Casing | Surface Casing | 2ND STG Casing | Intermediate Casing | Production String | Liner |
|---|------------------|----------------|----------------|---------------------|-------------------|-------|
| Cementing Date  |                  |                |                |                     | MAY 23-02         |       |
| *Size of Drill Bit (Inches)   |                  |                |                |                     |                   |       |
| *Estimated % wash or hole enlargement used in calculations              |                  |                |                |                     |                   |       |
| *Size of Casing (inches O.D.)   |                  |                |                |                     |                   |       |
| *Top of Liner (if liner used) (ft.)                                     |                  |                |                |                     |                   |       |
| *Setting Depth of Casing (ft.) from ground level                        |                  |                |                |                     |                   |       |
| Type of Cement (API Class)<br>In first (lead) or only slurry            |                  |                |                |                     | H                 |       |
| In second slurry  |                  |                |                |                     | NA                |       |
| In third slurry   |                  |                |                |                     | NA                |       |
| Sacks of Cement Used<br>In first (lead) or only slurry                  |                  |                |                |                     | 350               |       |
| In second slurry  |                  |                |                |                     | NA                |       |
| In third slurry   |                  |                |                |                     | NA                |       |
| Vol of slurry pumped (Cu ft)(14.X15.)<br>in first (lead) or only slurry |                  |                |                |                     | 375               |       |
| In second slurry  |                  |                |                |                     | NA                |       |
| In third slurry   |                  |                |                |                     | NA                |       |
| Calculated Annular Height of Cement behind Pipe (ft)                    |                  |                |                |                     | 8460              |       |
| Cement left in pipe (ft)  |                  |                |                |                     | 41                |       |

\*Amount of Surface Casing Required (from Form 1000) \_\_\_\_\_ ft.

|  |  |
|--|--|
| *Was cement circulated to Ground Surface? <input checked="" type="checkbox"/> YES <input type="checkbox"/> No      | *Was Cement Staging Tool (DV Tool) used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| *Was Cement Bond Log run? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If so, Attach Copy) | *If Yes, at what depth? _____ ft   |

**CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM**

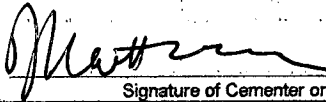
\* Designates items to be completed by Operator.  
Items not so designated shall be completed by the Cementing Company.

Remarks

\*Remarks

**CEMENTING COMPANY**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.

  
 Signature of Cementer or Authorized Representative

**OPERATOR**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.

\_\_\_\_\_  
 Signature of Operator or Authorized Representative

|                                |       |
|--------------------------------|-------|
| Name & Title Printed or Typed  |       |
| MATT CROUCH SERVICE SUPERVISER |       |
| Cementing Company              |       |
| B J SERVICES                   |       |
| Address                        |       |
| P.O. BOX 850570                |       |
| City                           |       |
| YUKON                          |       |
| State                          | Zip   |
| OK                             | 73085 |
| Telephone (AC) Number          |       |
| 405-354-8861                   |       |
| Date                           |       |
| MAY 23-02                      |       |

|                                |      |
|--------------------------------|------|
| *Name & Title Printed or Typed |      |
| *Operator                      |      |
| *Address                       |      |
| *City                          |      |
| *State                         | *Zip |
| *Telephone (AC) Number         |      |
| *Date                          |      |

**INSTRUCTIONS**

1. A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.
- B) An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
- C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
2. Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
3. Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
4. **IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.**