

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

ORIGINAL

Operator: License # 31021
Name: Castelli Exploration, Inc.
Address: 6908 N.W. 112th St.
City/State/Zip: Oklahoma City, OK 73162
Purchaser: Lumen Energy
Operator Contact Person: Thomas P. Castelli
Phone: (405) 722-5511
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 #1-31
Original Comp. Date: 09/08/98 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. _____

12-27-04
~~09/02/98~~ 09/07/98 12/27/04
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 185-23082-000-2
County: Stafford
____ C ____ SE ____ SE Sec. 31 Twp. 24 S. R. 15 East West
660 feet from S 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 #: 1-31
Field Name: Farmington


Producing Formation: Tarkio Lime & Kinderhook Miss
Elevation: Ground: 2047 Kelly Bushing: 2055
Total Depth: 4300' Plug Back Total Depth: 4245'
Amount of Surface Pipe Set and Cemented at 334.08 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 OWWO RGR 3/5/08
(Data must be collected from the Reserve Pit)
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: Christopher J. Greenlee
Title: EXPLORATION GEOLOGIST Date: 03-10-05
Subscribed and sworn to before me this 12th day of March
04
Notary Public: Tisha L. Braun
Date Commission Expires: 6/23/08


TISHA L. BRAUN
Canadian County
Notary Public in and for
State of Oklahoma
Commission # 04005632 Expires 6/23/08

KCC Office Use ONLY
NO Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received **RECEIVED**
____ Geologist Report Received **MAR 16 2005**
____ UIC Distribution
KCC WICHITA

X

Operator Name: Castelli Exploration, Inc. Lease Name: Seibert Well #: 1-31
 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 <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

CASING RECORD <input 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	334.08	Pos Mix	225	60-40 Poz
Production	7 7/8	4 1/2	11.6	4290	Mid Con II	180	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate	3016	Common	175	
<input type="checkbox"/> Protect Casing	2950	Common	100	
<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	Kinderhook 4200'-04', 4188'-86, 4182'-86'	4182-4200 1000 GA, Frac 20,000 gals + 12,000# sand	
2 SPF	Tarkio 3026'-3032'	1000 Gal 15% FE + 10% Methonol	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2			3/8"	4245' ???		
Date of First, Resumerd Production, SWD or Enhr. 2/12/05			Producing Method <input type="checkbox"/> Flowing <input checked="" 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	
		40 MCF				

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)* METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

RECEIVED
MAR 16 2005
KCC WICHITA