

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING REPORT
K.A.R.-82-3-117

API NUMBER 15-065-227960000

LEASE NAME College #74-2

WELL NUMBER 24-2

4740 Ft. from S Section Line

4210 Ft. from E Section Line

SEC. 24 TWP. 9S RGE. 24 (E) or (W)

COUNTY Graham

Date Well Completed 5/27/00

Plugging Commenced 5/27/00

Plugging Completed 5/27/00

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR Castle Resources, Inc.

ADDRESS P.O. Box 87, Schoenchen, KS 67667-0087

PHONE# (785) 625-5155 OPERATORS LICENSE NO. 9860

Character of Well D&A

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 5/27/00 (date)

by David Wann--Hays, KS (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.O. _____

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
		0	218	8 5/8	218	none

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set.
Plugged with 200 sacks 60/40 Poz., 6% Gel., 1/4# flocele. 1st plug - 25 sacks @ 2045', 2nd plug - 100 sacks @ 930', 3rd. plug - 40 sacks @ 260', wood plug - 10 sacks @ 40' to surface, rathole - 15 sacks, mousehole - 10 sacks.

RECEIVED
STATE CORPORATION COMMISSION
6-8-00

Name of Plugging Contractor Allied Cementing Company, Inc. License No. JUN 8 2000

Address P.O. Box 31, Russell, Kansas 67665

CONSERVATION DIVISION
Wichita, Kansas

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Castle Resources Inc.

STATE OF Kansas COUNTY OF Ellis, ss.

Jerry Green

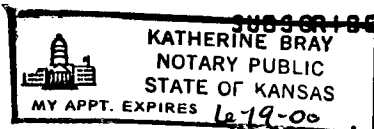
(Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed thereon, and the same are true and correct, so help me God.

(Signature) _____

(Address) PO Box 87 Schoenchen, KS 67667

SUBSCRIBED AND SWORN TO before me this 7th day of June, 2000



Katherine Bray
Notary Public

My Commission Expires: 6-19-00

USE ONLY ONE SIDE OF EACH FORM