

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
October 2008  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 9860  
Name: Castle Resources Inc.  
Address 1: PO Box 87  
Address 2: \_\_\_\_\_  
City: Schoenchen State: KS Zip: 67667 + \_\_\_\_\_  
Contact Person: Jerry Green  
Phone: ( 785 ) 625-5155  
CONTRACTOR: License # 33237  
Name: Anderson Drilling  
Wellsite Geologist: Jerry Green  
Purchaser: \_\_\_\_\_

Designate Type of Completion:  
 New Well     Re-Entry     Workover  
 Oil     SWD     SLOW  
 Gas     ENHR     SIGW  
 CM (Coal Bed Methane)     Temp. Abd.  
 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.     Conv. to SWD  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled    Docket No.: \_\_\_\_\_  
 Dual Completion    Docket No.: \_\_\_\_\_  
 Other (SWD or Enhr.?)    Docket No.: \_\_\_\_\_  
6/04/08    06/09/08    6/10/08  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 051-25782-00-00  
Spot Description: \_\_\_\_\_  
SW SW SE - Sec. 13 Twp. 11 S. R. 17S  East  West  
330 Feet from  North /  South Line of Section  
2310 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Ellis  
Lease Name: Pearl Cross Well #: A-1  
Field Name: Bemis  
Producing Formation: \_\_\_\_\_  
Elevation: Ground: 1893 Kelly Bushing: \_\_\_\_\_  
Total Depth: 3500 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 206 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 3510  
feet depth to: surface w/ 400 sx cmt.

Drilling Fluid Management Plan AH II NGR 4-6-08  
*(Data must be collected from the Reserve Pit)*  
Chloride content: 20,000 ppm Fluid volume: 100 bbls  
Dewatering method used: allowed to dry & backfill  
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: \_\_\_\_\_  
Title: President Date: 3/17/09  
Subscribed and sworn to before me this 17<sup>th</sup> day of MARCH,  
20 09.  
Notary Public: Katherine Bray  
Date Commission Expires: 7-3-12

NOTARY PUBLIC  
STATE OF KANSAS  
Katherine Bray  
Notary Public  
State Of Kansas  
My App. Exp. 7-3-12

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
RECEIVED  
MAR 20 2009

KCC WICHITA

Operator Name: Castle Resources Inc. Lease Name: Pearl Cross Well #: A-1  
 Sec. 13 Twp. 11 S. R. 17  East  West County: Ellis

**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 (Attach Additional Sheets)  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 (Submit Copy)  List All E. Logs Run: <u>ACOI RECD W/ 3 LOGS;</u> <u>MICRO; RAD. GRD.; DNAL RECD CBL</u>	<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>Topeka</td> <td>2806</td> <td>-908</td> </tr> <tr> <td>Heebner</td> <td>3040</td> <td>-1142</td> </tr> <tr> <td>LKC</td> <td>3099</td> <td>-1201</td> </tr> <tr> <td>BKC</td> <td>3326</td> <td>-1428</td> </tr> <tr> <td>Arbuckle</td> <td>3394</td> <td>-1496</td> </tr> <tr> <td>RTD</td> <td>3511</td> <td>-1613</td> </tr> </table>	Name	Top	Datum	Topeka	2806	-908	Heebner	3040	-1142	LKC	3099	-1201	BKC	3326	-1428	Arbuckle	3394	-1496	RTD	3511	-1613
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RTD	3511	-1613																				

*Handwritten:* KCC  
1/19/89

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#	206	common	150	3% CC 2% gel
production		5 1/2"	14#	3500'		400	

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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	3370	P-plug		

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	3184-86	300 gallons 15% MCA	
4	3120-24	300 gallons 15% MCA	
4	2838-42	300 gallons 15% MCA	RECEIVED
4	3464-38, 3418-22, 3394-98	500 gallons 15% MCA	MAR 2 1989

*Handwritten:* KCC  
1/19/89

TUBING RECORD: Size: <u>n/a</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed 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

*Handwritten:* KCC WICHITA

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CHARGE TO: <i>Castle Resources</i>
ADDRESS
CITY, STATE, ZIP CODE

TICKET  
No 13750

PAGE	OF
1	2

SERVICE LOCATIONS 1. <i>Hays, Ks</i>	WELL/PROJECT NO. # <i>1A</i>	LEASE <i>Pearl Cress</i>	COUNTY/PARISH <i>Ellis</i>	STATE <i>Ks</i>	CITY	DATE <i>6-10-08</i>	OWNER
2. <i>Ness City, Ks</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>A&amp;A Drg</i>	RIG NAME/NO.	SHIPPED VIA <i>CT</i>	DELIVERED TO <i>NE/HAYS, Ks</i>	ORDER NO.	
3.	WELL TYPE <i>Oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cement 5 1/2" Longstring</i>	WELL PERMIT NO.	WELL LOCATION		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			U/M			
575		1			MILEAGE #106		<i>2/10 mi</i>		<i>6.00</i>	<i>240.00</i>
578		1			Pump Charge - Longstring		<i>1 ea</i>	<i>3500 ft</i>	<i>1900.00</i>	<i>1900.00</i>
221		1			Liquid KCL		<i>2 gal</i>		<i>26.00</i>	<i>52.00</i>
290		1			D-Air		<i>7 gal</i>		<i>35.00</i>	<i>140.00</i>
402		1			Centralizers		<i>5 ea</i>	<i>5 1/2 in</i>	<i>100.00</i>	<i>500.00</i>
403		1			Cement Baskets		<i>3 ea</i>	<i>5 1/2 in</i>	<i>300.00</i>	<i>900.00</i>
406		1			Latch down Plug & Baffle		<i>1 ea</i>	<i>5 1/2 in</i>	<i>235.00</i>	<i>235.00</i>
407		1			Insert Float Shoe w/Fill Up		<i>1 ea</i>	<i>5 1/2 in</i>	<i>310.00</i>	<i>310.00</i>
330		2			SMD Cement		<i>400 sks</i>		<i>15.50</i>	<i>6200.00</i>
276		2			Floccle		<i>100 lbs</i>		<i>1.50</i>	<i>150.00</i>
581		2			Service Charge		<i>400 sks</i>		<i>1.90</i>	<i>760.00</i>
583		2			Drayage		<i>39828 lbs</i>	<i>796.56 TM</i>	<i>1.05</i>	<i>1393.98</i>

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 MAR 20 2009  
 KCC WICHTA

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X  
DATE SIGNED *6-10-08* TIME SIGNED  A.M.  P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.  
P.O. BOX 466  
NESS CITY, KS 67560  
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					<i>12280.98</i>
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	<i>12,730.79</i>

*Ellis TAX 5.3%* *449.81*

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR *Don Lamm*

APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 10-10-08 PAGE NO. 7

CUSTOMER *Castle Resources* WELL NO. *1-A* LEASE *Prudhoe* JOB TYPE *Concrete 5 1/2" casing* LANSING TICKET NO. *13250*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1145							Installation w float equip
	1315							Hold tally & figure Pipe Tally Start 5 1/2" 14# casing - SJ 14.53' Insert float shoe w / fill up latch down Bottle - Cont 1-4-8-72-9: Cement Beakers 9-78-96 Jts
	1520							Fin run casing - Top Bottom (Drop Ball) Set collar @ Ground level
	1510							Start CIR casing - wait for WTR track fin
	1610							Fin CIR casing
			3					Plug RH 15 SKS SMD
	1625	12 1/2	20			250		Pump 20 BBL KCL fluid
		7				350		Start 400 SKS SMD cont 1/4" / sec Acc
		7	146			300		@ 11.2 = 300 SK - last 100 ramp
		7	186			250		Weight up to 14#
		5	206			200		Fin mixing cont.
								Wash Pump & Lines
	1720	7				300		Drop Plug - Start Displ
		5 1/2				500		Press before Plug down
	1715		85			1500		Plug Down - Hold - Release & Hold 30 SKS cont CIR to PT - (15 BBL)
								Job Complete Wash up & Rack up.
								Thanks Alan, Blaine & Don @ of Swift Services
								RECEIVED MAR 20 2009 KCC WICHITA

# ALLIED CEMENTING CO., LLC. 32770

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

SERVICE POINT:  
Russell

DATE <u>6-4-08</u>	SEC. <u>13</u>	TWP. <u>11</u>	RANGE <u>17</u>	CALLED OUT	ON LOCATION	JOB START <u>4:00pm</u>	JOB FINISH <u>4:30pm</u>
LEASE <u>Pearl Creek</u>		WELL# <u>A-1</u>	LOCATION <u>Codell River Rd Sect</u>		COUNTY <u>Ellis</u>	STATE <u>Ks</u>	
OLD OR <u>NEW</u> (Circle one)			<u>1 3/4 E 3/4 S Winto</u>				

CONTRACTOR AA Drilling Rig #1  
 TYPE OF JOB Surface Sls  
 HOLE SIZE 12 1/4 T.D. 217  
 CASING SIZE 8 5/8 DEPTH 212  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. 15'  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT 12.5 bbl

OWNER \_\_\_\_\_  
 CEMENT  
 AMOUNT ORDERED 150 Com 3% CC  
2% Gel

EQUIPMENT  
 PUMP TRUCK CEMENTER Shane  
 # 909 HELPER Robert  
 BULK TRUCK  
 # 396 DRIVER Rocky  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	<u>150</u>	@	<u>12.15</u>	<u>1822.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>18.25</u>	<u>54.75</u>
CHLORIDE	<u>S</u>	@	<u>51.00</u>	<u>255.00</u>
ASC		@		
HANDLING	<u>158</u>	@	<u>2.01</u>	<u>323.90</u>
MILEAGE	<u>54/mi/09</u>			<u>426.60</u>
TOTAL				<u>2882.75</u>

RECEIVED  
MAR 20 2009  
KCC-WICHITA

**REMARKS:**

Cement Circ!

CHARGE TO: Castle Resources  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**SERVICE**

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>553.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>30</u>	@	<u>7.00</u> <u>210.00</u>
MANIFOLD		@	
TOTAL <u>1103.00</u>			

**PLUG & FLOAT EQUIPMENT**

		@	
		@	
	<u>8 5/8 Wood Plug</u>	@	<u>66.00</u>
TOTAL <u>66.00</u>			

To Allied Cementing Co., LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES \_\_\_\_\_  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

PRINTED NAME \_\_\_\_\_  
 SIGNATURE Edo Jenesac