

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: Coffeyville Resources
Operator Contact Person: Jerry Green
Phone: (785) 625-5155
Contractor: Name: Murfin Drilling Company
License: 30606
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>3/5/07</u>	<u>3/12/07</u>	<u>3/12/07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25629-0000
County: Ellis
E/2 E/4 Sec. 27 Twp. 12 S. R. 20 East West
1300 feet from (S) N (circle one) Line of Section
330 feet from (E) W (circle one) Line of Section

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

Producing Formation: _____
Elevation: Ground: 2202 Kelly Bushing: 2207
Total Depth: 3940' Plug Back Total Depth: 3905
Amount of Surface Pipe Set and Cemented at 8 5/8" @ 221 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from TD
feet depth to surface w/ 410 sx cmt.

Drilling Fluid Management Plan AIT II NH 7-21-08
(Data must be collected from the Reserve Pit)

Chloride content 3000 ppm Fluid volume 800 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: 9/10/07

Subscribed and sworn to before me this 10th day of SEPTEMBER, 2007.

Notary Public: Katherine Bray
Date Commission Expires: 7-3-08



KCC Office Use ONLY

N Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received **RECEIVED**
 Geologist Report Received **KANSAS CORPORATION COMMISSION**

UIC Distribution **SEP 14 2007**

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Castle Resources Inc. Lease Name: S & W Well #: 1
 Sec. 27 Twp. 12 S. R. 20 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 <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>Anhydrite</td> <td>1562-1608</td> <td>+645</td> </tr> <tr> <td>Topeka</td> <td>3253</td> <td>-1046</td> </tr> <tr> <td>Heebner</td> <td>3482</td> <td>-1275</td> </tr> <tr> <td>Lansing-KC</td> <td>3523</td> <td>-1316</td> </tr> <tr> <td>Base-KC</td> <td>3774</td> <td>-1567</td> </tr> <tr> <td>Marmaton</td> <td>3818</td> <td>-1611</td> </tr> <tr> <td>Conglomerate</td> <td>3850</td> <td>-1643</td> </tr> <tr> <td>Arbuckle</td> <td>3926</td> <td>-1719</td> </tr> </table>	Name	Top	Datum	Anhydrite	1562-1608	+645	Topeka	3253	-1046	Heebner	3482	-1275	Lansing-KC	3523	-1316	Base-KC	3774	-1567	Marmaton	3818	-1611	Conglomerate	3850	-1643	Arbuckle	3926	-1719
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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#	221	common	150	3% CC 2% gel
production		4 1/2	9.5	3939	standard	410	multi density

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 <i>(Amount and Kind of Material Used)</i>	Depth
3828-31 3756-60	4 holes per ft	500 gallons & 750 gallons 15% FE	
3734-37 3713-17	4 holes per ft	750 gallons 15% FE	
3689-91	4 holes per ft	750 gallons 15% FE	
3665-67	4 holes per ft	750 gallons 15% FE	
3577-79	4 holes per ft	500 gallons 15% FE	

TUBING RECORD	Size 2 3/8"	Set At 3880'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		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. 112	Gas Mcf	Water Bbls. 25	Gas-Oil Ratio
				Gravity 35

Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	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 <div style="text-align: right;"> RECEIVED KANSAS CORPORATION COMMISSION SEP 14 2007 </div>
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CHARGE TO: **CASTLE RESOURCES**
 ADDRESS:
 CITY, STATE, ZIP CODE:

RECEIVED
 KANSAS CORPORATION COMMISSION
 SEP 14 2007
 CONSERVATION DIVISION
 WICHITA, KS

TICKET

N^o 11816

PAGE 1 OF 2

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. #1	LEASE S-W	COUNTY/PARISH ELLIS	STATE Ks	CITY	DATE 3-11-07	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR MURPHY #24	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATED	ORDER NO.	
3.	WELL TYPE OEL	WELL CATEGORY DEVELOP/MWT	JOB PURPOSE 4 1/2" LONGSTRING	WELL PERMIT NO.	WELL LOCATION ELLIS, KS - 3N, 3E, 1/4N, W3		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 104	40		ME		4.00	160.00
578		1			PUMP SERVICE	1		JOB	3940 FT	1250.00	1250.00
221		1			LEAD KCL	2		Gal		26.00	52.00
281		1			MUD PUSHT	500		Gal		.75	375.00
402		1			CENTRALIZERS	6		EA	4 1/2"	70.00	420.00 480.00
403		1			CONWT BASKETS	3		EA		270.00	810.00
406		1			LATCH DOWN PLUG - BAFFLE	1		EA		210.00	210.00
407		1			INSECT FLOAT SHOE W/ AUTO FEEL	1		EA		250.00	250.00

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

Anthony Mark
 DATE SIGNED: **3-11-06** TIME SIGNED: **2:00**
 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 #1	3527.00 3807.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				#2	7551.75
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				subtotal	11,078.75
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TAX Ellis 5.3%	444.79
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	11,523.54

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

SWIFT OPERATOR: *Wawe Wasow* APPROVAL:

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE **3-11-07** PAGE NO. **1**

CUSTOMER **CASTLE RESOURCES** WELL NO. **#1** LEASE **S-W** JOB TYPE **4 1/2" LOW STRONG** TICKET NO. **11816**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBLS/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	2200							ON LOCATION
	2330							START 4 1/2" CASING IN WELL
								TD-3940 SET 3939
								TP-3943 4 1/2" / FT 9.5
								SS-19'
								CORRELATIONS - 1, 3, 7, 11, 59, 69
								CMT BSEIS - 10, 52, 68
	0130							DROP BALL - CONCRETE
	0205		4 1/2					PLUG RH-MH
	0210	6	130		✓	400		MIX 235 SKS SMD e 11.2 PP6
	0235	6	5		✓	750		PUMP 5 BBLS SPAER
	0236	6	60		✓	750		PUMP 60 BBLS MUD
	0246	6	12		✓	800		PUMP 500 GAL MUD FLUSH
	0248	6	20		✓	800		PUMP 20 BBLS KCL FLUSH
	0254	4	42		✓	400 ^{ADD}		MIX 175 SKS EA-2 e 15.5 PP6
	0306							WASH OUT PUMP - LEVES
	0307							RELEASE LATCH DOWN PLUG
	0309	6 1/2	0		✓			DISPARE PLUG
	0318	6	63.6			1500		PLUG DOWN - PSEUP LATCH IN PLUG
	0320							OK RELEASE PSE - HELD
								CORRELATED 40 SKS CSMT TO POT
	0430							WASH TRUCK
								JOB COMPLETE

THANK YOU
 WAYNE, DUSTY, BOB SEAN
 RECEIVED
 KANSAS CORPORATION COMMISSION
 SEP 14 2007
 CONSERVATION DIVISION
 WICHITA, KS

ALLIED CEMENTING CO., INC.

25835

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

SERVICE POINT:
Oakley, KS

DATE <u>3-5-07</u>	SEC. <u>27</u>	TWP. <u>12</u>	RANGE <u>20</u>	CALLED OUT	ON LOCATION <u>5:00pm</u>	JOB START <u>6:30pm</u>	JOB FINISH <u>7:00pm</u>
LEASE <u>SLW</u>	WELL # <u>#1</u>	LOCATION <u>Ellis 1 1/2 N 2 E</u>			COUNTY <u>Ellis</u>	STATE <u>KS</u>	
OLD OR <u>(NEW)</u> (Circle one)				<u>1 1/2 N 2 E</u>			

CONTRACTOR Murphy #24

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 224'

CASING SIZE 8 5/8 DEPTH 224'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ DEPTH _____

MEAS. LINE _____ MINIMUM _____

CEMENT LEFT IN CSG. 15' SHOE JOINT _____

PERFS. _____

DISPLACEMENT 13.5 BALS

OWNER Sams

CEMENT AMOUNT ORDERED 150 SKS

Com 390cc + 290cc

COMMON	<u>150</u>	@ <u>10⁶⁵</u>	<u>1597⁵⁰</u>
POZMIX		@	
GEL	<u>3</u>	@ <u>16⁶⁵</u>	<u>49⁹⁵</u>
CHLORIDE	<u>5</u>	@ <u>46⁶⁰</u>	<u>233⁰⁰</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>158</u>	@ <u>1⁹⁰</u>	<u>300²⁰</u>
MILEAGE	<u>.09 x 54 mile</u>		<u>639⁰⁰</u>
TOTAL			<u>2820⁵⁵</u>

EQUIPMENT

PUMP TRUCK CEMENTER Fuzz4

422 HELPER Kelly

BULK TRUCK

377 DRIVER Mike

BULK TRUCK

_____ DRIVER _____

REMARKS:

cement did circulate.

Apply 5 BALS

Plus down @ 7:00pm

Thanks Fuzz4

& crew

SERVICE

DEPTH OF JOB 224'

PUMP TRUCK CHARGE 815⁰⁰

EXTRA FOOTAGE @ _____

MILEAGE 45 @ 6⁰⁰ 270⁰⁰

MANIFOLD + Head @ _____ 100⁰⁰

@ _____

@ _____

↓ Russell

TOTAL 1185⁰⁰

CHARGE TO: Castle Resources

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

1-8 5/8 Plus @ _____ 60⁰⁰

@ _____

@ _____

@ _____

@ _____

TOTAL 685⁰⁰ RECEIVED
KANSAS CORPORATION COMMISSION

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.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SEP 14 2007

CONSERVATION DIVISION
WICHITA, KS

SIGNATURE Anthony Martin

Anthony Martin