

**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 # 9860
Name: Castle Resources Inc.
Address: PO Box 87
City/State/Zip: Schoenchen, KS 67667
Purchaser: Coffeyville
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>5/31/07</u>	<u>6/6/07</u>	<u>6/6/07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 135-24639-0000
County: Ness
SE NE SW Sec. 13 Twp. 17 S. R. 22 East West
1585 feet from S / N (circle one) Line of Section
2538 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Albers Well #: 1

Field Name: Kleweno
Producing Formation: Mississippi
Elevation: Ground: 2265 Kelly Bushing: 2270
Total Depth: 4300 Plug Back Total Depth: 4283

Amount of Surface Pipe Set and Cemented at 8 5/8" @ 214 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/ 350 sx cmt.

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

Chloride content 8,000 ppm Fluid volume 600 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.

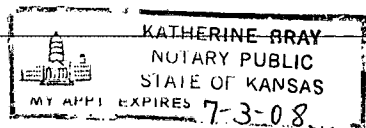
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: _____
Title: President Date: 8-21-07

Subscribed and sworn to before me this 24th day of AUGUST, 2007.

Notary Public: Katherine Bray

Date Commission Expires: 7-3-08



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____ **RECEIVED**
 Wireline Log Received **KANSAS CORPORATION COMMISSION**
 Geologist Report Received **SEP 14 2007**
 UIC Distribution

**CONSERVATION DIVISION
WICHITA, KS**

Operator Name: Castle Resources Inc. Lease Name: Albers Well #: 1
 Sec. 13 Twp. 17 S. R. 22 East West County: Ness

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>1524-59</td> <td>+746</td> </tr> <tr> <td>Heebner</td> <td>3662</td> <td>-1392</td> </tr> <tr> <td>Lansing-KC</td> <td>3707</td> <td>-1437</td> </tr> <tr> <td>Base-KC</td> <td>3982</td> <td>-1712</td> </tr> <tr> <td>Fort Scott</td> <td>4166</td> <td>-1896</td> </tr> <tr> <td>Weathered Mississippi</td> <td>4242</td> <td>-1972</td> </tr> <tr> <td>Mississippi Osage</td> <td>4256</td> <td>-1986</td> </tr> <tr> <td>RTD</td> <td>4303</td> <td>-2033</td> </tr> </table>	Name	Top	Datum	Anhydrite	1524-59	+746	Heebner	3662	-1392	Lansing-KC	3707	-1437	Base-KC	3982	-1712	Fort Scott	4166	-1896	Weathered Mississippi	4242	-1972	Mississippi Osage	4256	-1986	RTD	4303	-2033
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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#	213	common	170	3% CC 2% gel
production		5 1/2"	14#	4300	standard	350	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
4264-4269	4 holes per ft	300 gallons 20% acid	

TUBING RECORD	Size 2 3/8"	Set At 4260	Packer At	Liner Run <input type="checkbox"/> Yes <input 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. 2	Gas Mcf	Water Bbls. 200	Gas-Oil Ratio Gravity

Disposition of Gas	METHOD OF COMPLETION	Production Interval	RECEIVED
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> _____	KANSAS CORPORATION COMMISSION SEP 14 2007



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
6/7/2007	12199

BILL TO
Castle Resources Inc. PO Box 87 Schoenchen, KS 67667

181204
ALB
Cement Long String

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#1	Albers	Ness	Murfin Drilling #24	Oil	Development	5-1/2" LongString	Wayne

PRICE REF.	DESCRIPTION	QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way	20	Miles	4.00	80.00
578D-L	Pump Charge - Long String - 4300 Feet	1	Job	1,250.00	1,250.00
221	Liquid KCL (Clayfix)	2	Gallon(s)	26.00	52.00T
281	Mud Flush	500	Gallon(s)	0.75	375.00T
402-5	5 1/2" Centralizer	7	Each	95.00	665.00T
403-5	5 1/2" Cement Basket	3	Each	290.00	870.00T
406-5	5 1/2" Latch Down Plug & Baffle	1	Each	235.00	235.00T
407-5	5 1/2" Insert Float Shoe With Auto Fill	1	Each	310.00	310.00T
419-5	5 1/2" Rotating Head Rental	1	Each	250.00	250.00T
325	Standard Cement	150	Sacks	12.00	1,800.00T
330	Swift Multi-Density Standard (MIDCON II)	200	Sacks	14.50	2,900.00T
276	Flocele	88	Lb(s)	1.25	110.00T
283	Salt	800	Lb(s)	0.20	160.00T
284	Calseal	7	Sack(s)	30.00	210.00T
285	CFR-1	71	Lb(s)	4.00	284.00T
290	D-Air	3	Gallon(s)	32.00	96.00T
581D	Service Charge Cement	350	Sacks	1.10	385.00
583D	Drayage	356.79	Ton Miles	1.00	356.79
	Subtotal				10,388.79
	Sales Tax Ness County			5.30%	440.80

PO# 6135107
CC # 8179

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

We Appreciate Your Business!

Total \$10,829.59

ALLIED CEMENTING CO., INC.

30399

Federal Tax I.D.# _____

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

SERVICE POINT Great Bend
Missouri

DATE <u>6-31-07</u>	SEQ. <u>13</u>	TWP. <u>17</u>	RANGE <u>22</u>	CALLED OUT <u>6 PM</u>	ON LOCATION <u>11 AM</u>	JOB START <u>12:45 AM</u>	JOB FINISH <u>1:30 AM</u>
LEAS. <u>Abbers</u>	WELL # <u>1</u>	LOCATION <u>Bazine 8N 1/4 NW 1/4</u>			COUNTY <u>Miss</u>	STATE <u>K.S.</u>	

OLD OR NEW (Circle one)

CONTRACTOR Murfin Rig 24

TYPE OF JOB Surface

HOLE SIZE _____ T.D. 213 #

CASING SIZE _____ DEPTH 213 #

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15 #

PERFS. _____

DISPLACEMENT 12 bbl

EQUIPMENT

PUMP TRUCK # 181 CEMENTER Mike M
HELPER Randy P

BULK TRUCK # 3114 DRIVER J. P.

BULK TRUCK # _____ DRIVER _____

REMARKS:

Circulate Hole with Rig Mud Pump
Mix Cement + Release Plug +
Displace Plug Down with Water

Cement did Circulate to
Surface

CHARGE TO: Castle Resor

STREET _____

CITY _____ STATE _____ ZIP _____

*Thank you
CHP*

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.

SIGNATURE Anthony Martin

OWNER _____

CEMENT AMOUNT ORDERED 160 Common
32cc 22gel

COMMON	<u>160</u>	@	<u>11.10</u>	<u>1776.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>16.65</u>	<u>49.95</u>
CHLORIDE	<u>5</u>	@	<u>46.60</u>	<u>233.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>168</u>	@	<u>1.90</u>	<u>319.20</u>
MILEAGE	<u>20.9.168</u>			<u>302.40</u>
TOTAL				<u>2680.55</u>

SERVICE

DEPTH OF JOB	<u>213 #</u>		
PUMP TRUCK CHARGE			<u>815.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>20</u>	@	<u>6.00</u> <u>120.00</u>
MANIFOLD		@	
	<u>head rent.</u>	@	<u>100.00</u>
		@	
TOTAL <u>1035.00</u>			

PLUG & FLOAT EQUIPMENT

<u>1-8 5/8 wood</u>	@	<u>60.00</u>
	@	
	@	
	@	
	@	
TOTAL <u>60.00</u>		

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Anthony Martin