

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 9860
Name: CASTLE RESOURCES, INC.
Address 1: P.O. BOX 87
Address 2: _____
City: SCHOENCHEN State: KS Zip: 67667 + 0087
Contact Person: JERRY GREEN
Phone: (785) 625-5155
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 127-20582-00-00
Spot Description: _____
SE SE Sec. 2 Twp. 15 S. R. 5 East West
660 Feet from North / South Line of Section
660 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: MORRIS
Lease Name: ELLEN Well #: 1
Date Well Completed: _____
The plugging proposal was approved on: 5/19/09 (Date)
by: VIRGIL CLOTHIER (KCC District Agent's Name)
Plugging Commenced: 5/19/09
Plugging Completed: 5/19/09

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

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
			8 5/8"	220'	0

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

1st Plug @ 270' w/ 35 sx.
2nd Plug @ 60' w/ 25 sx.
3rd Plug @ Rathole w/ 15 sx.
Total 75 sx 60/40 Pozmix, 4% Gel., 1/4# FloSeal
Plug Down @ 12:30 P.M. on 5/19/09 by Allied Cementing, Ticket # 36301

RECEIVED
MAY 22 2009
KCC WICHITA

Plugging Contractor License #: 6039 Name: L. D. DRILLING, INC.
Address 1: 7 SW 26 AVE. Address 2: _____
City: GREAT BEND State: KS Zip: 67530 + _____
Phone: (620) 793-3051
Name of Party Responsible for Plugging Fees: CASTLE RESOURCES, INC.
State of KANSAS County, BARTON, ss.
SUSAN SCHNEWEIS Employee of Contractor or Operator on above-described well.
(Print Name)

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 is as filed, and the same are true and correct, so help me God.

Signature: _____

Handwritten initials