

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1  
October 2008  
Form Must Be Typed

ORIGINAL

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 # 6039 **KANSAS CORPORATION COMMISSION**  
Name: L.D. Drilling Inc. **JUL 16 2009**  
Wellsite Geologist: Jerry Green  
Purchaser: \_\_\_\_\_ **RECEIVED**

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.: PTA  
5/15/09 5/18/09 3/19/09  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

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  
Field Name: Wildcat  
Producing Formation: \_\_\_\_\_  
Elevation: Ground: 1404' Kelly Bushing: 1409'  
Total Depth: 2178' Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 220 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: \_\_\_\_\_  
feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ PA-Dlg-7/31/09 <sup>sx amt.</sup>

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content: 10,000 ppm Fluid volume: 300 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: 7/14/09  
Subscribed and sworn to before me this 14<sup>th</sup> day of July, 2009.  
Notary Public: Katherine Bray  
Date Commission Expires: 7-3-12

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

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

Operator Name: Castle Resources Inc. Lease Name: Ellen Well #: 1  
 Sec. 2 Twp. 15 S. R. 5  East  West County: Morris

**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 checked="" type="checkbox"/> Yes <input 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: <b>dual induction log</b> <b>neutron density</b>	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>1440</td> <td>-1429</td> </tr> <tr> <td>Lansing</td> <td>1617</td> <td>-208</td> </tr> <tr> <td>Kansas City</td> <td>1736</td> <td>-327</td> </tr> <tr> <td>BKC</td> <td>1953</td> <td>-544</td> </tr> <tr> <td>Miss-Chert</td> <td>2138</td> <td>-729</td> </tr> <tr> <td>Miss-LMS</td> <td>2163</td> <td>-754</td> </tr> <tr> <td>RTD</td> <td>2174</td> <td>-1165</td> </tr> </table>	Name	Top	Datum	Heebner	1440	-1429	Lansing	1617	-208	Kansas City	1736	-327	BKC	1953	-544	Miss-Chert	2138	-729	Miss-LMS	2163	-754	RTD	2174	-1165
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CASING RECORD <input type="checkbox"/> New <input checked="" 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"	24#	220'	Common	150	3%CC, 2%GEL

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 checked="" type="checkbox"/> Plug Off Zone	1st plug 270'	60/40 POZ	35	
	2nd plug 60'	60/40 POZ	25	

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
	N/A		

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 <i>(Explain)</i> _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>N/A</u>	Gas Mcf _____	Water Bbls. _____ Gas-Oil Ratio _____ Gravity _____

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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# ALLIED CEMENTING CO., LLC. 036301

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

SERVICE POINT:  
Great Bend KS

DATE <u>5-19-09</u>	SEC. <u>2</u>	TWP. <u>15</u>	RANGE <u>5</u>	CALLED OUT <u>630 AM</u>	ON LOCATION <u>1100 AM</u>	JOB START <u>1130 AM</u>	JOB FINISH <u>1230 PM</u>
LEASE <u>Ellen</u>	WELL# <u>1</u>	LOCATION <u> Hwy 4 East To hatching</u>			COUNTY <u>Morris</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>1 East - 2 North west into</u>				

CONTRACTOR L-O Drilling  
 TYPE OF JOB Rotary Plug  
 HOLE SIZE 7 7/8 T.D. 2178  
 CASING SIZE 8 5/8 DEPTH 2178  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE 4 1/2 DEPTH 2178  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. \_\_\_\_\_  
 PERFS. \_\_\_\_\_

OWNER Castle Resources  
 CEMENT AMOUNT ORDERED 75 SX 60/40 4% Gel  
1/4 flo seal

EQUIPMENT  
 PUMP TRUCK CEMENTER Wayne - D  
 # 366 HELPER Galien - D  
 BULK TRUCK  
 # 344-170 DRIVER Alvin R  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	<u>45</u>	@	<u>13.50</u>	<u>607.50</u>
COMMISSION	<u>30</u>	@	<u>7.55</u>	<u>226.50</u>
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
ORIDE		@		
ASC		@		
seal	<u>18 #</u>	@	<u>0.85</u>	<u>15.30</u>
HANDLING	<u>75</u>	@	<u>2.25</u>	<u>169.75</u>
MILEAGE	<u>130/75/10</u>			<u>975.00</u>
TOTAL				<u>2053.80</u>

KANSAS CORPORATION  
 JUL 16 2009  
 RECEIVED

REMARKS:

1st plug 270 Run 15 BBLs fresh water  
Mix 35 SX 60/40 4% 1/4 flo seal  
Displace 1 BBL  
2nd plug 60 Mix 25 SX 60/40 4% 1/4 flo seal  
Displace .25 BBL  
Ret mix 15 SX at 60/40 4% 1/4 flo seal

DEPTH OF JOB 270  
 PUMP TRUCK CHARGE 991.00  
 EXTRA FOOTAGE @ \_\_\_\_\_  
 MILEAGE 130 @ 7.00 910.00  
 MANIFOLD @ \_\_\_\_\_

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

TOTAL 1,901.00

PLUG & FLOAT EQUIPMENT

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.

PRINTED NAME Bill Owen  
 SIGNATURE Bill Owen

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

# ALLIED CEMENTING CO., LLC. 037520

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

SERVICE POINT:  
Russell

DATE <u>5-16-09</u>	SEC. <u>2</u>	TWP. <u>15</u>	RANGE <u>5</u>	CALLED OUT	ON LOCATION	JOB START <u>2:00 AM</u>	JOB FINISH <u>2:30 AM</u>
LEASE <u>ELLEN</u>	WELL # <u>1</u>	LOCATION <u>Latimer 1/2E</u>			COUNTY <u>Morrison</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>2 1/2 Winto</u>				

CONTRACTOR L-D Drilling

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 223

CASING SIZE 8 5/8 23# DEPTH 220

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15

PERFS.

DISPLACEMENT 13 BC

OWNER

CEMENT

AMOUNT ORDERED 150 @ 6 1/4

30% CC

290.60

COMMON	<u>90</u>	@	<u>13.50</u>	<u>1215.00</u>
POZAMIX	<u>60</u>	@	<u>7.55</u>	<u>453.00</u>
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
CHLORIDE	<u>5</u>	@	<u>51.50</u>	<u>257.50</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>150</u>	@	<u>2.21</u>	<u>337.50</u>
MILEAGE	<u>110/50/piece</u>			<u>1650.00</u>
TOTAL				<u>3973.75</u>

KANSAS CORPORATION COMMISSION  
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EQUIPMENT

PUMP TRUCK CEMENTER Craig

# 409 HELPER CH

BULK TRUCK

# 344 DRIVER Randy

BULK TRUCK

# DRIVER

REMARKS:

Surface Job

Cement Circulated.

Trans.

CHARGE TO: Castle Resources

STREET

CITY STATE ZIP

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.

PRINTED NAME Bill Owen

SIGNATURE Bill Owen

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE 991.00

EXTRA FOOTAGE @

MILEAGE 110 @ 7.00 770.00

MANIFOLD @

TOTAL 1761.00

PLUG & FLOAT EQUIPMENT

1 5/8 wiper plug

TOTAL

SALES TAX (If Any)

TOTAL CHARGES

DISCOUNT IF PAID IN 30 DAYS