

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

ORIGINAL

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 # 30606
Name: Murfin Drilling Company
Wellsite Geologist: Jerry Green
Purchaser: _____

Designate Type of Completion:
____ New Well ____ Re-Entry Workover
 Oil ____ SWD ____ SIOW
____ 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: Kaiser Francis
Well Name: Aistrup #1
Original Comp. Date: 9-30-71 Original Total Depth: 4673
____ 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.: _____

<u>1/12/09</u>	<u>1/13/09</u>	<u>1/13/09</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 083-20182-00-01
Spot Description: _____
C SW SW Sec. 29 Twp. 23 S. R. 21 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: Hodgeman
Lease Name: Aistrup Well #: 1
Field Name: Wildcat
Producing Formation: Mississippi
Elevation: Ground: 2360 Kelly Bushing: 2365
Total Depth: 4450 Plug Back Total Depth: 4450
Amount of Surface Pipe Set and Cemented at: 268 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 4450
feet depth to: 240' w/ 500 sx cmt.

Drilling Fluid Management Plan OWWD-AIT II NCR
(Data must be collected from the Reserve Pit) 10-14-09
Chloride content: 20,000 ppm Fluid volume: 500 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: 9/10/09
Subscribed and sworn to before me this 10th day of SEPTEMBER,
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
KANSAS CORPORATION COMMISSION
SEP 14 2009
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Castle Resources Inc. Lease Name: Aistrup Well #: 1
 Sec. 29 Twp. 23 S. R. 21 East West County: Hodgeman

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 type="checkbox"/> Yes <input checked="" 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: Gamma Neutron <input checked="" type="checkbox"/>	<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>1462</td> <td>+903</td> </tr> <tr> <td>Heebner</td> <td>3952</td> <td>-1587</td> </tr> <tr> <td>Lansing-KC</td> <td>4046</td> <td>-1681</td> </tr> <tr> <td>Marmaton</td> <td>4410</td> <td>-2045</td> </tr> </table>	Name	Top	Datum	Anhydrite	1462	+903	Heebner	3952	-1587	Lansing-KC	4046	-1681	Marmaton	4410	-2045
Name	Top	Datum														
Anhydrite	1462	+903														
Heebner	3952	-1587														
Lansing-KC	4046	-1681														
Marmaton	4410	-2045														

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"	24	268	COM	200'	3% CC 2% Gel
long string	7 7/8"	5/12	15.5	4431	common	500	

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 (Amount and Kind of Material Used)	Depth
	4431-4450	1500 gallons 15% acid	

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>4410'</u> 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 checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>40</u>	Gas Mcf _____ Water Bbls. <u>0</u> 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 checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION RECORD 4431-4450 RECEIVED KANSAS CORPORATION COMMISSION SEP 14 2009
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CHARGE TO: CASTLE RESOURCES
ADDRESS
CITY, STATE, ZIP CODE

RECEIVED
KANSAS CORPORATION COMMISSION
SEP 14 2009
CONSERVATION DIVISION
WICHITA, KS

TICKET
No 15558

PAGE	OF
1	2

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. #1-OWWO	LEASE AIZTRUP	COUNTY/PARISH HODGEMAN	STATE KS	CITY	DATE 1-12-09	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR MURFEN DRUG #24	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 5 1/2" LONGSTRING	WELL PERMIT NO.	WELL LOCATION HAWSTON, KS - 75, 3E		
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 #110	50		ME		7.00	350.00
578		1			PUMP SERVICE	1		JOB	4431	14.00	1400.00
221		1			LIQUID KCL	2		GA		26.00	52.00
281		1			MUDFLUSH	500		GA		1.00	500.00
402		1			CENTRALIZERS	8		EA	5 1/2"	100.00	800.00
403		1			CEMENT BASKETS	3		EA		300.00	900.00
406		1			LATCH DOWN PLUG - BAFFLE	1		EA		260.00	260.00
407		1			INSERT FLOAT SHOE W/AUTO FILL	1		EA		325.00	325.00

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 Mart
DATE SIGNED: 1-12-09 TIME SIGNED: 1330
E.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	4587.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#2	12056.29
WE UNDERSTOOD AND MET YOUR NEEDS?				sub total	16643.29
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				TAX	748.75
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Hodgeman @ 4.5%	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TOTAL	17,392.04
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

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

SWIFT OPERATOR: *Wayne Wilson* APPROVAL:

Thank You!



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 15558

CUSTOMER CASTLE RESOURCES WELL A2STRUP # 1 OWWD DATE 1-12-09 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
330		1				SWIFT MULTI-DEXTY STANDARD	525	SKS			16.00	8400.00
276		1				FLOCELE	131	URS			1.50	196.50
290		1				D-ADR	5	GAL			35.00	175.00
581		1				SERVICE CHARGE					1.90	997.50
583		1				MILEAGE CHARGE					1.75	2287.29
						TOTAL WEIGHT	52281					
						LOADED MILES	50					
						CUBIC FEET	525					
						TON MILES	1307.025					

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CONSERVATION DIVISION
WICHITA, KS

CONTINUATION TOTAL 12056.29

• JOB LOG

SWIFT Services, Inc.

DATE 1-12-09 PAGE NO. 1

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
CASTLE RESOURCES		#1-OWWO		ADSTRUP		5 1/2" LONGSTRING		15558	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	1330								ON LOCATION
	1230								START 5 1/2" CASING IN WELL
									TD-4450 SET @ 4431
									TP-4431 5 1/2" 14
									ST-23'
									CENTRALIZERS - 1, 3, 7, 13, 35, 55, 72, 88
									CMT BSKTS - 13, 72, 88
	1500								DROP BALL - CALCULATE
	1540	6	12		✓		500		PUMP 500 GAL MUD FLUSH
	1542	6	20		✓		500		PUMP 20 BBLs KCL-FLUSH
	1550		6/8						PLUG RH - XTH (25 SKS)
	1555	6 1/4	152		✓		350		MIX CEMENT 275 SKS @ 11.2 PPG
		6 1/4	22		✓				70 SKS @ 13.5 PPG
		6 1/4	55		✓				100 SKS @ 11.2 PPG
		6	16		✓		400		55 SKS @ 14.0 PPG
	1642								WASH OUT PUMP & LINES
	1643								RELEASE WITH DOWN PLUG
	1645	7	0		✓				DISPLACE PLUG
		6 1/2	105				1200		
	1700	6 1/2	107.6				1500		PLUG DOWN - PSE UP LATCH IN PLUG
	1702						OK		RELEASE PSE - HELD CMT TO PET @ SKS JET CELLUD / MUD
									WASH TRUCK
	1800								JOB COMPLETE
									THANK YOU WAYNE, BRETT, SCOTT, DON

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