

ORIGINAL

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

RECOMPLTD. ACOI RECD IN LHM
OF OXIG. ACOI BEING CORRT'D.
(RECD 7/16/09)

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 # 31627
Name: Whitetail Crude Inc.
Wellsite Geologist: Jerry Green
Purchaser: Plains
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: Sunray DX & Wilcox Oil
Well Name: Miller #2
Original Comp. Date: 12/20/62 Original Total Depth: 4871
____ 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.: _____
1/15/08 6/08 6/10/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 083-10249-00-01
Spot Description: _____
C SW NE Sec. 21 Twp. 22 S. R. 22 East West
1980 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Hodgeman
Lease Name: Miller Well #: 2
Field Name: Hanston
Producing Formation: Mississippi
Elevation: Ground: 2211 Kelly Bushing: _____
Total Depth: 4513 Plug Back Total Depth: 4480
Amount of Surface Pipe Set and Cemented at: 267 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, how depth set: _____ Feet
If Alternate II completion, cement circulated from: plugged and squeezed
____ depth to: _____ w/ _____ sx cm.

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JUL 16 2009
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____ Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 20,000 ppm Fluid volume: 160 bbls
Dewatering method used: hauled off
Location of fluid disposal if hauled offsite:
Operator Name: Berexco Inc.
Lease Name: Ray Lee #4 License No.: 5363
Quarter SW Sec. 16 Twp. 22 S. R. 22 East West
County: Hodgeman Docket No.: D-14241

100-Dg-145/10

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: 7-1-09
Subscribed and sworn to before me this 14th day of July
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
N Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Operator Name: Castle Resources Inc. Lease Name: Miller Well #: 2
 Sec. 21 Twp. 22 S. R. 22 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: none	<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>Heebner</td> <td>3739</td> <td>-1523</td> </tr> <tr> <td>LKC</td> <td>-3798</td> <td>-1582</td> </tr> <tr> <td>BKC</td> <td>4100</td> <td>-1884</td> </tr> <tr> <td>Mississippi</td> <td>4407</td> <td>-2191</td> </tr> </table>	Name	Top	Datum	Heebner	3739	-1523	LKC	-3798	-1582	BKC	4100	-1884	Mississippi	4407	-2191
Name	Top	Datum														
Heebner	3739	-1523														
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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"	28	267	common	200	
long string	7 7/8"	5 1/2"		4712	common	250	

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				KANSAS CORPORATION COMMISSION JUL 16 2009

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
four	4410-40	1000 15% HCL	

TUBING RECORD: Size: <u>2 7/8</u> Set At: <u>4440</u> Packer At: <u> </u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>6/10/08</u>	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>20</u> Gas Mcf <u>none</u> Water Bbls. <u>300</u> Gas-Oil Ratio <u>N/A</u> Gravity <u>38</u>

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: _____ _____
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October 2008
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WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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Contact Person: Jerry Green
Phone: (785) 625-5155
CONTRACTOR: License # 31627
Name: Whitetail Crude, Inc.
Wellsite Geologist: Jerry Green
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Spot Description: _____
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1980 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Hodgeman
Lease Name: Miller Well #: 2
Field Name: Hanston
Producing Formation: Mississippi

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.)

Elevation: Ground: -2211 Kelly Bushing: _____
Total Depth: 4513 Plug Back Total Depth: 4480
Amount of Surface Pipe Set and Cemented at: 267 Feet
Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
Bernate II completion, cement circulated from: plugged and squeezed
feet depth to: _____ w/ _____ sx cmt.

If Workover/Re-entry: Old Well Info as follows:
Operator: Sunray DX Oil Co.
Well Name: Miller #2
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1-2-08 1/15/08 10/08 6-08 1/09
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Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 20,000 ppm Fluid volume: 160 bbls
Dewatering method used: hauled off
Location of fluid disposal if hauled offsite: _____
Operator Name: Berexco Inc.
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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: 7/1/09
Subscribed and sworn to before me this 1ST day of July,
20 09
Notary Public: KATHERINE BRAY
Date Commission Expires: 7-3-12

KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

KATHERINE BRAY
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 7-3-12

Operator Name: Castle Resources Inc. Lease Name: Miller Well #: 2
 Sec. 21 Twp. 22 S. R. 22 East West County: Hodgeman

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