

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 # 34190  
Name: Vision Oil & Gas Services  
Wellsite Geologist: Jerry Green  
Purchaser: MV Purchasing  
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: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
\_\_\_\_ Deepening \_\_\_\_ Re-perf. \_\_\_\_ Conv. to Enhrr. \_\_\_\_ Conv. to SWD  
\_\_\_\_ Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
\_\_\_\_ Commingled Docket No.: \_\_\_\_\_  
\_\_\_\_ Dual Completion Docket No.: \_\_\_\_\_  
\_\_\_\_ Other (SWD or Enhrr.?) Docket No.: \_\_\_\_\_  
10-8-09      10-16-09      10-16-09  
Spud Date or      Date Reached TD      Completion Date or  
Recompletion Date           Recompletion Date

API No. 15 - 123-20008-00-00  
Spot Description: \_\_\_\_\_  
SE .NE .SW - Sec. 32 Twp. 6 S. R. 8  East  West  
1650 Feet from  North /  South Line of Section  
2310 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Mitchel  
Lease Name: McKinnie Well #: 1  
Field Name: wildcat  
Producing Formation: dry in PC - rift sediments  
Elevation: Ground: 1409' Kelly Bushing: 1417  
Total Depth: 4675 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 422 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 422  
feet depth to: surface w/ 275 *PA - DLg - 2/22/10* sq cm

**Drilling Fluid Management Plan**  
*(Data must be collected from the Reserve Pit)*  
Chloride content: 30,000 ppm Fluid volume: 500 bbls  
Dewatering method used: Hauled free fluid  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: Jeff's Oilwell Supervision  
Lease Name: Carmichael #4 License No.: 32247  
Quarter NW/4 Sec. 15 Twp. 9 S. R. 17  East  West  
County: Rooks 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: 2/16/10  
Subscribed and sworn to before me this 16<sup>th</sup> day of FEBRUARY,  
20 10  
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**  
**FEB 19 2010**

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Operator Name: Castle Resources Inc. Lease Name: McKinnie Well #: 1  
 Sec. 32 Twp. 6 S. R. 8  East  West County: Mitchel

**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 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>DIL ND Sonic</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:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>2398</td> <td>-981</td> </tr> <tr> <td>LKC</td> <td>2470</td> <td>-1053</td> </tr> <tr> <td>BKC</td> <td>2824</td> <td>-1407</td> </tr> <tr> <td>Simpson</td> <td>3862</td> <td>-2445</td> </tr> <tr> <td>Arbuckle</td> <td>3924</td> <td>-2507</td> </tr> <tr> <td>RTD</td> <td>4669</td> <td>-3252</td> </tr> </table>	Name	Top	Datum	Heebner	2398	-981	LKC	2470	-1053	BKC	2824	-1407	Simpson	3862	-2445	Arbuckle	3924	-2507	RTD	4669	-3252
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CASING RECORD <input checked="" 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	422	common	275	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 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

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TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 1-6-10			Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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# ALLIED CEMENTING CO., LLC. 037658

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

SERVICE POINT:  
Russell

DATE <u>10-8-09</u>	SEC. <u>32</u>	TWP. <u>6</u>	RANGE <u>8</u>	CALLED OUT	ON LOCATION	JOB START <u>5:00pm</u>	JOB FINISH <u>5:30pm</u>
LEASE <u>McKinnic</u>	WELL # <u>1</u>	LOCATION <u>Beloit 6 1/2 W Ninto</u>		COUNTY <u>Mitchell</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Vision #14

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 422

CASING SIZE 8 5/8 23# DEPTH 422

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 25 1/2 B C

OWNER

CEMENT

AMOUNT ORDERED 275 Com

3% O.C.C

2% O.C.C

COMMON	<u>275</u>	@	<u>13.50</u>	<u>3712.50</u>
POZMIX		@		
GEL	<u>5</u>	@	<u>20.25</u>	<u>101.25</u>
CHLORIDE	<u>10</u>	@	<u>51.50</u>	<u>515.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>275</u>	@	<u>2.25</u>	<u>618.75</u>
MILEAGE	<u>104.6/mile</u>			<u>1650.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Craig

# 417 HELPER Matt

BULK TRUCK

# 410 DRIVER Chris

BULK TRUCK

# DRIVER 1

REMARKS:

8 5/8 Casing on Bottom. Est. Circulation.

Mix Cement's Displace.

Cement Circulated!

TRANS.

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE 991.00

EXTRA FOOTAGE @

MILEAGE 60 @ 7.00 420.00

MANIFOLD @

TOTAL 1411.00

CHARGE TO: Castle Resource S

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

18-78 Wooden Plug @ 66.00

@

@

@

@

TOTAL 66.00

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

SIGNATURE Robert W. M

SALES TAX (If Any)

TOTAL CHARGES 8,074.50

DISCOUNT 20% IF PAID IN 30 DAYS

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# ALLIED CEMENTING CO., LLC. 33397

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

SERVICE POINT:  
Great Bend KS

DATE <u>10-16-09</u>	SEC. <u>32</u>	TWP. <u>6S</u>	RANGE <u>8 W</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00 AM</u>	JOB FINISH <u>1:00 AM</u>
LEASE <u>Mechanic</u>	WELL # <u>1</u>	LOCATION <u>Beloit, 6 west</u> <del>Great Bend KS</del>			COUNTY <u>Mitchell</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Uison  
 TYPE OF JOB Rotary plug  
 HOLE SIZE 7 7/8 T.D. 4679  
 CASING SIZE DEPTH  
 TUBING SIZE DEPTH  
 DRILL PIPE 4 1/2 DEPTH 4300  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG.  
 PERFS.  
 DISPLACEMENT 6 3/4 BBLs 530 lbs Mud

OWNER Castle Resources Inc  
 CEMENT  
 AMOUNT ORDERED 125 SY 60/40 4% Gel

EQUIPMENT  
 PUMP TRUCK CEMENTER wayne - D  
 # 181 HELPER Alvin  
 BULK TRUCK  
 # 378 DRIVER chris -  
 BULK TRUCK  
 # DRIVER

COMMON	<u>75</u>	@	<u>13.50</u>	<u>1012.50</u>
POZMIX	<u>50</u>	@	<u>7.55</u>	<u>377.50</u>
GEL	<u>4</u>	@	<u>20.25</u>	<u>81.00</u>
CHLORIDE		@		
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>129</u>	@	<u>2.25</u>	<u>290.25</u>
MILEAGE	<u>129 x 10 x 1.10</u>			<u>774.00</u>
TOTAL				<u>2,535.25</u>

REMARKS:

1st plug 4300 mix 35SY 60/40 4% Gel 4 fl seal Displace 5 BBLs of water and 53 BBLs of mud  
2nd plug 422 mix 50SY 60/40 4% Gel 4 fl seal Displace 1.5 BBLs of water  
3rd plug 60 ft mix 25SY 60/40 4% Gel 4 fl seal Displace 2.5 BBL  
Rot mix 15 SY wash up Rig Down

SERVICE

DEPTH OF JOB	<u>4300</u>			
PUMP TRUCK CHARGE				<u>1159.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>60</u>	@	<u>7.00</u>	<u>420.00</u>
MANIFOLD		@		
		@		
		@		
TOTAL				<u>1579.00</u>

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

PLUG & FLOAT EQUIPMENT

<u>1 wooden plug</u>	@	<u>66.00</u>	
	@		
	@		
	@		
	@		
TOTAL			<u>66.00</u>

To Allied Cementing Co., LLC.  
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PRINTED NAME Geoff Aldridge  
 SIGNATURE Geoff Aldridge

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES 1579.00  
 DISCOUNT 0.00 IF PAID IN 30 DAYS

RECEIVED  
 FEB 19 2010  
 KCC WICHITA