#### For KCC Use: 7-122010 Effective Date: District # SGA?

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form C-1 March 2010 Form must be Typed Form must be Signed All blanks must be Filled

### NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well
Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

Expected Spud Date: July 15 2010	Spot Description:	
month day year	S/2 _ SW _ SE _ NW Sec. 22 Twp. 8	S. R. 18 EXW
9860	(OM) (OM)	N / S Line of Section
OPERATOR: License#		E / X W Line of Section
Address 1: PO Box 87	Is SECTION: Regular Irregular?	
Address 2:	<del>_</del>	
City: Schoenchen State: KS Zip: 67667 + 0087	(Note: Locate well on the Section Plat or County: Rooks	reverse side)
Contact Person: Jerry Green HEUEIVED	Lease Name: Kriley	Well #: 1
Phone: 785-625-5155	Field Name: Harmony Hill	vven #:
CONTRACTOR: License# 34190	Is this a Prorated / Spaced Field?	
Name: Vision Oil & Gas Services LLC	Target Formation(s): Arbuckle	Yes XNo
CONSERVATION DIVISION	Nearest Lease or unit boundary line (in footage): 330	
Well Drilled For: Well Class: Wie Have payers	Ground Surface Elevation: 1961	feet MSL
⊠Oil ✓ ☐Enh Rec ☐Infield ✓ Mud Rotary	Water well within one-quarter mile:	Yes XNo.
Gas Storage X Pool Ext. Air Rotary	Public water supply well within one mile:	Yes X No
DisposalWildcatCable	Depth to bottom of fresh water:	
Seismic; # of Holes Other	Depth to bottom of usable water:	
Other:	Surface Pipe by Alternate:	
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set: 200'	-
	Length of Conductor Pipe (if any):	
Operator:	Projected Total Depth: 3400	
Well Name:Original Total Depth:	Formation at Total Depth: Arbuckle	
Onginal Completion Date Onginal total Depth.	Water Source for Drilling Operations:	
Directional, Deviated or Horizontal wellbore?	Weil Farm Pond Other:	
If Yes, true vertical depth:	DWR Permit #:	
Bottom Hole Location:	(Note: Apply for Permit with DWI	RIX /
KCC DKT #:	Will Cores be taken?	☐ Yes ⊠No
	If Yes, proposed zone:	
Oil + bas loase Submitted.  AFFL	DAVIT	
•	IDAVIT	
The undersigned hereby affirms that the drilling, completion and eventual plug	iging of this well will comply with K.S.A. 55 et. seq.	
It is agreed that the following minimum requirements will be met:		
Notify the appropriate district office <i>prior</i> to spudding of well;		
2. A copy of the approved notice of intent to drill shall be posted on each		a aball be not
<ol><li>The minimum amount of surface pipe as specified below shall be set b through all unconsolidated materials plus a minimum of 20 feet into the</li></ol>		e snali pe set
If the well is dry hole, an agreement between the operator and the distri-		rior to plugging;
5. The appropriate district office will be notified before well is either plugge		
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented		•
Or pursuant to Appendix "B" - Eastern Kansas surface casing order #13		
must be completed within 30 days of the spud date or the well shall be		any cementing.
I hereby certify that the statements made herein are true and to the best of my	y knowledge and belief.	
Date: 4/30/10 Signature of Operator or Agent:	Title: PRES	FOEN t
Date. Signature of Operator of Agent.		
For KCC Use ONLY	Remember to:	I
API#15-163-23884-0000	- File Certification of Compliance with the Kansas Surfa	ce Owner Notification
	Act (KSONA-1) with Intent to Drill;	
Conductor pipe requiredfeet	<ul> <li>File Drill Pit Application (form CDP-1) with Intent to Dr</li> <li>File Completion Form ACO-1 within 120 days of spud</li> </ul>	L = -
Minimum surface pipe requiredfeet per ALTI	- File acreage attribution plat according to field proration	
Approved by: 244 7-7-2010	- Notify appropriate district office 48 hours prior to work	over or re-entry;
This authorization expires: 7-72011	- Submit plugging report (CP-4) after plugging is compl	eted (within 60 days);
(This authorization void if drilling not started within 12 months of approval date.)	- Obtain written approval before disposing or injecting s	alt water.
" "	- If well will not be drilled or permit has expired (See: au	
Spud date: Agent:	please check the box below and return to the address	
	Well will not be drilled or Permit Expired Dat	e:
Mail to: KCC - Conservation Division,	Signature of Operator or Agent:	¥

For KCC Use ONLY API # 15 - 163-23884-00-0

### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: Castle Resources inc.	Location of Well: County: Rooks
Lease: Kriley	2,500 feet from N / S Line of Section
Well Number: 1	1,650 feet from E / X W Line of Section
Field: Harmony Hill	Sec. 22 Twp. 8 S. R. 18 E W
Number of Acres attributable to well:	Is Section: Regular or Irregular
QTR/QTR/QTR/QTR of acreage: S/2 - SW - SE - NW	13 Occupit.
	If Section is irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW
PL.i Show location of the well. Show footage to the nearest lease roads, tank batteries, pipelines and electrical lines, as required as you may attach a sep	ase or unit boundary line. Show the predicted locations of ired by the Kansas Surface Owner Notice Act (House Bill 2032).
f i f	LEGEND
35 po F	O Well Location  Tank Battery Location  Pipeline Location  Electric Line Location  Lease Road Location
1650' X 22	EXAMPLE
RECEIVED KANSAS CORPORATION COMMISSION	1000; EQ

1980' FSL

SEWARD CO. 3390' FEL

NOTE: In all cases locate the spot of the proposed drilling locaton.

### In plotting the proposed location of the well, you must show:

CONSERVATION DIVISION WICHĮTA, KS

- 1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
- 2. The distance of the proposed drilling location from the south / north and east / west outside section lines.
- 3. The distance to the nearest lease or unit boundary line (in footage).
- 4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CDP-1 May 2010 Form must be Typed

## **APPLICATION FOR SURFACE PIT**

Submit in Duplicate

Operator Name: Castle Resources Inc.		License Number: 9860		
Operator Address: PO Box 87			Schoenchen KS 67667	
Contact Person: Jerry Green			Phone Number: 785-625-5155	
Lease Name & Well No.: Kriley	1		Pit Location (QQQQ):	
Type of Pit:	Pit is:	· · · · · · · · · · · · · · · · · · ·		
Emergency Pit Burn Pit	X Proposed	Existing	Sec. 22 Twp. 8 R. 18 East X West	
Settling Pit X Drilling Pit	If Existing, date cor	nstructed:	2,500 Feet from X North / South Line of Section	
Workover Pit Haul-Off Pit  (If WP Supply API No or Year Drilled) Pit capacity:		<del></del>	1,650 Feet from East / X West Line of Section	
(If WP Supply API No. or Year Drilled)	500	(bbls)	Rooks County	
Is the pit located in a Sensitive Ground Water Area? Yes X No		Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)		
is the bottom below ground level?  X Yes No	Artificial Liner?	No	How is the pit lined if a plastic liner is not used? sealed with bentonite	
Pit dimensions (all but working pits):				
Depth from ground level to deepest point:5 (feet) No Pit				
If the pit is lined give a brief description of the liner RECEIVED  Describe procedures for periodic maintenance and determining material, thickness and installation proce <b>gues</b> CORPORATION COMMISSION including any special monitoring.				
Material, the diese and installation prose NATSA		Signator integrity, in	islasing any opecial monitoring.	
	JUL 02 2010			
CONSERVATION DIVISION WICHITA, KS				
Distance to nearest water well within one-mile of pit:  Depth to shallo Source of infor		west fresh water 50 feet.		
r/afeet Depth of water well	feet	measured	well owner electric log KDWR	
Emergency, Settling and Burn Pits ONLY:		Drilling, Work	over and Haul-Off Pits ONLY:	
Producing Formation:		Type of materia	ıl utilized in drilling/workover:drilling mud	
Number of producing wells on lease: Number of working		king pits to be utilized:		
Barrels of fluid produced daily: Abandonment procedure:allow contents to dry and backfill				
Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No Drill pits must be closed within 365 days of spud date.		e closed within 365 days of spud date.		
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.				
Date  USignature of Applicant or Agent				
KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS				
Date Received: 7-6-10 Permit Number: Permit Date: 7-6-10 Lease Inspection: Yes 🗷 No				

15-163-2384-00-00

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License # 9860	Well Location:	
Name: Castle Resources Inc. Address 1: PO Box 87	S/2 SW SE NW Sec. 22 Twp. 8 S. R. 18 Eas West	
Address 1: PO Box 87	County: Rooks	
Address 2:	Lease Name: Kriley Well #: 1	
City: Schoenchen State: KS Zip: 67667 + 0087	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:	
Contact Person: Jerry Green		
Phone: ( 785 ) 625-5155 Fax: ( 785 ) 625-4151		
City: Schoenchen State: KS Zip: 67667 + 0087  Contact Person: Jerry Green  Phone: ( 785 ) 625-5155 Fax: ( 785 ) 625-4151  Email Address: castleresources@hotmail.com		
Surface Owner Information: KANSAS CORPORATION COMMISSION		
Name: Theresa L. Kriley etal	When filing a Form T-1 involving multiple surface owners, attach an additional	
Address 1: 1650 16 Rd.	sheet listing all of the information to the left for each surface owner. Surface	
Name:         Theresa L. Kriley etal         JUL 0 2 2010           Address 1:         1650 16 Rd.         CONSERVATION DIVISION WICHITA, KS           City:         Stockton         State:         KS         Zip: 67669 +	owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.	
City: Stockton State: KS 7in: 67669	, , ,	
are preliminary non-binding estimates. The locations may be entered on t Select one of the following:	ше гонн с-т рыт, гонн св-т рыт, ога separate рыт тау ве submitted.	
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and  I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner(s), I acknowledge that I am being charged a \$30.00 handling fee	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address.  Inowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this	
If choosing the second option, submit payment of the \$30.00 handling fe form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	ne with this form. If the fee is not received with this form, the KSONA-1 will be returned.	
I hereby certify that the statements made herein are true and correct to the	ne best of my knowledge and belief.	
[ ]	1	
Date: 6/30 110 Signature of Operator or Agent:	Title: PRESEDEAT	

# Castle Resources INC Kriley #1



