

FORM MUST BE TYPED

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
ACO-1 WELL HISTORY  
DESCRIPTION OF WELL AND LEASE

Operator: License # 9860  
Name: Castle Resources Inc.  
Address: PO Box 87  
Schoenchen, KS 67667

Purchaser: \_\_\_\_\_  
Operator Contact Person: Jerry Green  
Phone (785) 625-5155  
Contractor: Name: Shields Drilling Company  
License: 5184  
Wellsite Geologist: Jerry Green

Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSV, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Inj/SWD  
 Plug Back  PBTD  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Inj?)  Docket No. \_\_\_\_\_  
8-19-97 8-27-97 8-27-97  
Spud Date Date Reached TD Completion Date

API NO. 15- 051-249750000  
County Ellis  
W/2-E/2-SE Sec. 20 Twp. 11S Rge. 18  <sup>E</sup> <sub>W</sub>

1320 Feet from S/W (circle one) Line of Section  
990 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
NE. (SW), NW or SW (circle one)

Lease Name Wasinger Well # 4  
Field Name Bemis

Producing Formation none  
Elevation: Ground 2040 KB 2045

Total Depth 3620 PBTD \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 210 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/ \_\_\_\_\_ sx cat.

Drilling Fluid Management Plan D&A JH 11-26-97  
(Data must be collected from the Reserve Pit)

Chloride content 14,000 ppm Fluid volume 3000 bbls

Dewatering method used evaporation

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name \_\_\_\_\_

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_ E/W \_\_\_\_\_

County \_\_\_\_\_ Docket No. \_\_\_\_\_

RECEIVED  
KANSAS CORPORATION  
1997 SEPT 17 10 12

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 on 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 9-15-97

Subscribed and sworn to before me this 15<sup>th</sup> day of SEPTEMBER, 19 97.

Notary Public Katherine Bray

Date Commission Expires 6-19-2000

KATHERINE BRAY  
NOTARY PUBLIC  
STATE OF KANSAS  
MY APPT. EXPIRES 6-19-2000

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Geologist Report Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other (Specify)

SIDE TWO

Operator Name Castle Resources Inc. Lease Name Wasinger Well # 4  
 Sec. 20 Twp. 11S Rge. 18  East County Ellis  
 West

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	Topeka	3030	-985
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	3258	-1213
List All E.Logs Run:		LKC	3300	-1255
		BKC	3530	-1485
		Conglomerate	3580	-1535
		RTD	3620	-1575

DST #1 3362 - 3404

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 pipe	12 1/4	8 5/8	20	210	60/40 poz	135	2% gel 3% CC

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		N/A		
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
	N/A			

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SMD or Inj.	Producing Method
D&A	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil N/A Bbls.	Gas N/A Mcf.	Water N/A Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas:  Vented  Sold  Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION:  Open Hole  Perf.  Quality Comp.  Commingled  Other (Specify)

Production Interval: \_\_\_\_\_

# ALLIED CEMENTING CO., INC. 5055

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

## ORIGINAL

SERVICE POINT

*Russell*

DATE <i>8-26-47</i>	SEC <i>20</i>	TWP <i>11</i>	RANGE <i>18</i>	CALLED OUT <i>7:00 PM</i>	ON LOCATION <i>11:00 PM</i>	JOB START	JOB FINISH <i>2:00 PM</i>
LEASE <i>W. Singer</i>		WELL # <i>4</i>	LOCATION <i>SP 2 W 2 N HAYS</i>		COUNTY <i>Ellis</i>	STATE <i>Kan</i>	

OLD OR NEW (Circle one)

CONTRACTOR *Shields Drilling*

TYPE OF JOB *Plug*

HOLE SIZE *7 1/2* T.D. *3620*

CASING SIZE DEPTH

TUBING SIZE DEPTH

DRILL PIPE *13.60* DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

OWNER

CEMENT

AMOUNT ORDERED *200 lbs 60/40 - 6 1/2" F10*

COMMON @

POZMIX @

GEL @

CHLORIDE @

HANDLING @

MILEAGE @

EQUIPMENT

PUMP TRUCK CEMENTER *Rond*

# *221* HELPER

BULK TRUCK DRIVER

BULK TRUCK DRIVER *Bill L*

TOTAL

### REMARKS:

*1st Plug @ 1360 25 lbs*

*2nd plug @ 750 100 lbs*

*3rd plug @ 250 40 lbs*

*4th plug @ 40 10 lbs*

*15 lbs R4H hole 10 lbs M&S hole*

### SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

PLUG @

TOTAL

CHARGE TO: *Castle Res Inc*

STREET

CITY STATE ZIP

### FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 DAYS

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE *Ed Serrano*





JOB LOG 4239-5

15.05124995 0000

REGION North America	NWA/COUNTRY	TICKET # 19/295-0	TICKET DATE 8-21-97
MBU ID / EMP # 1100501 / 47550	EMPLOYEE NAME	BDA / STATE	COUNTY Falls
LOCATION	COMPANY	PSL DEPARTMENT	
TICKET AMOUNT	WELL TYPE	CUSTOMER REP / PHONE	
WELL LOCATION	DEPARTMENT	API / UWI #	
LEASE / WELL	SEC / TWP / RNG	JOB PURPOSE CODE 010	

HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS
E. R. [unclear] 47550							
M. [unclear] 5111							
L. [unclear] 10372							

ORIGINAL

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (PSI)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
41326	0512		80					Called out - Job ready Now
53557	0615		30					Outbox - Hole Cut to 210' - Rig Circ - Pre Set-up Satby
52418	8M		30					Set up Equip
	0716							Rig Start Pumping DP
	0739							Rig Start 8 5/8" Disp
	0832							Csg @ 107' - Hook up to Circ
	0834							Rig Start Circ
	0842							Hook up to PT
	0854	3.0	5.0			100		Start 5 bbl water
	0857	4.7				100		Start mixing 135 sks. 40/60 Poz. 2% Gel - 3% C.G.
	0909		31.2			50		Finish mixing Cement
								Release 8 5/8" Tap Plug
	0911		12.7			0		Start disp.
	0915					50		Plug down
								Cmt. Circulated
								Wash up - Rack up - Complete Tkt
	0945							Job Completed

Thank you Eldon, Mel, Kyle