

WELL PLUGGING REPORT
K.A.R.-82-3-117

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

API NUMBER 15-051-250260000

LEASE NAME Billinger

WELL NUMBER 1

3755 Ft. from S Section Line

2300 Ft. from E Section Line

SEC. 2 TWP. 11S RGE. 19 (E) or (W)

COUNTY Ellis

Date Well Completed 4-4-00

Plugging Commenced 4-4-00

Plugging Completed 4-4-00

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR Castle Resources, Inc.

ADDRESS P.O. Box 87, Schoenchen, KS 67667-0087

PHONE# (785) 625-5155 OPERATORS LICENSE NO. 9860

Character of Well D&A

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 4-4-00 (date)

by David Wann-Hays, KS (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? _____

Producing Formation none Depth to Top _____ Bottom _____

Show depth and thickness of all water, oil and gas formations.

RECEIVED
STATE CORPORATION COMMISSION
JUN 2 2000

OIL, GAS OR WATER RECORDS

CASING RECORD

CONSERVATION DIVISION
Wichita, Kansas

Formation	Content	From	To	Size	Put in	Pulled out
		0	212	8 5/8	212	none

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set.
Plugged with 190 sacks 60/40 Poz., 6% Gel., 1/4# flocele, 1st. plug - 25 sacks @ 1420', 2nd. plug - 100 sacks @ 740', 3rd. plug - 40 sacks @ 260', Woodplug - 10 sacks to surface @ 40', rathole - 15 sacks.

Name of Plugging Contractor Allied Cementing Company, Inc. License No. _____

Address P.O. Box 31, Russell, Kansas 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Castle Resources Inc

STATE OF Kansas COUNTY OF Ellis, ss.

Jerry Green (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above-described well as filed in the same are true and correct, so help me God.

(Signature) _____

(Address) PO box 87 Schoenchen, KS

67667

SUBSCRIBED AND SWORN TO before me this 31st day of May, 2000



Katherine Bray
Notary Public



MY APPT. EXPIRES 6-19-2000
USE ONLY ONE SIDE OF EACH FORM