

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

RECEIVED
OCT 24 2002
KCC WICHITA
ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 9860
Name: Castle Resources Inc.
Address: PO Box 87
City/State/Zip: Schoenchen, KS 67667
Purchaser: Eott
Operator Contact Person: Jerry Green
Phone: (785) 625-5155
Contractor: Name: Anderson Drilling
License: 30076
Wellsite Geologist: Jerry Green

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 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 Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
6-26-02 7-4-02 7-4-02
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 165 21742-0000
County: Rush
AP NESWNW Sec. 23 Twp. 16 S. R. 20 East West
1595 feet from S (circle one) Line of Section
950 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: North Well #: 1

Field Name: _____
Producing Formation: Arbuckle
Elevation: Ground: 2147 Kelly Bushing: 2152
Total Depth: 3950 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 216 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2110 Feet
If Alternate II completion, cement circulated from 2110
feet depth to surface w/ 225 sx cmt.
multidensity

Drilling Fluid Management Plan AKH 11 Ee 10-03-02
(Data must be collected from the Reserve Pit)
Chloride content 6,000 ppm Fluid volume 300 bbls
Dewatering method used allow to dry & backfill
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ 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: 10-21-02
Subscribed and sworn to before me this 21ST day of OCTOBER
2002.
Notary Public: KATHERINE BRAY
Date Commission Expires: 7-3-04

KATHERINE BRAY
NOTARY PUBLIC
STATE OF KANSAS
MY APPL. EXPIRES 7-3-04

KCC Office Use ONLY

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

Operator Name: Castle Resources Inc. Lease Name: North Well #: 1
 Sec. 23 Twp. 16 S. R. 20 East West County: Rush

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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes	No	Log	Formation (Top), Depth and Datum	Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	Yes	<input checked="" type="checkbox"/> No	Anhydrite	1384-1420	768
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes	No	Topeka	3172	-1020
List All E. Logs Run:			Heebner	3462	-1310
			Toronto	3482	-1330
			Lansing-KC	3505	-1353
			Base-KC	3764	-1612
			Pawnee	3825	-1673
			Arbuckle	3873	-1721
			RTD	3948	-1796

CASING RECORD							
				New	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		8 5/8"	20#	216'	60/40poz	150	
production		5 1/2"	15.5#	3945'	common	175	EA2

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	2110-surf	multidensity	225	

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
4/ft.	3884-86	natural	

TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	<input checked="" type="checkbox"/> No
		2 7/8"	3850'				
Date of First, Resumed Production, SWD or Enhr.		Producing Method					
7-20-02		Flowing	<input checked="" type="checkbox"/> Pumping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
	200	N/A			42		

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

(If vented, Sumit ACO-18.) Other (Specify) _____

15-165-21742-0000

ALLIED CEMENTING CO., INC.

P.O. BOX 31
RUSSELL, KS 67665
PH (785) 483-3887
FAX (785) 483-5566
FEDERAL TAX ID# 48-0727860

ORIGINAL

INVOICE

Invoice Number: 087511

Invoice Date: 06/30/02

RECEIVED

OCT 24 2002

KCC WICHITA

6120
NORTH

Surface Cement

Sold Castle Resources, Inc.

To: P.O. Box 87
Schoenchen, KS
67665

Cust I.D.....: Cast
P.O. Number...: North #1
P.O. Date.....: 06/30/02

Due Date: 07/30/02

Terms: Net 30

Item I.D./Desc.	Qty.	Used	Unit	Price	Net	TX
Common	90.00		SKS	6.6500	598.50	E
Pozmix	60.00		SKS	3.5500	213.00	E
Gel	3.00		SKS	10.0000	30.00	E
Chloride	5.00		SKS	30.0000	150.00	E
Handling	150.00		SKS	1.0500	157.50	E
Mileage (31)	31.00		MILE	6.0000	186.00	E
150 sks @ \$.04 per sk per mi						
Surface	1.00		JOB	520.0000	520.00	E
Mileage pmp trk	31.00		MILE	3.0000	93.00	E
Wooden plug	1.00		EACH	45.0000	45.00	E

All Prices Are Net. Payable 30 Days Following
Date of Invoice! 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$ 199.30
ONLY if paid within 30 days from Invoice Date

Subtotal: 1993.00
Tax.....: 0.00
Payments: 0.00
Total....: 1993.00

<199.30>

1793.70

pd
7-23-02
cc # 2289

SWIFT SERVICES, INC.

PO BOX 466

NESS CITY, 67560-0466

181204 ORIGINAL Invoice
Cement upper stage

DATE	INVOICE #
7/10/02	4651

BILL TO
Castle Resources Inc. PO Box 87 Schoenchen, KS 67667

RECEIVED
OCT 24 2002
KCC WICHITA

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Operator	Job Purpose
Net 30	1	North	Rush	Professional Pullin...	Oil	Development	Wayne	Cement port c...
PRICE REFERE...	DESCRIPTION				QTY	UNIT PRICE	AMOUNT	
575D	Milage				30	2.50	75.00	
577D	Pump Service				1	700.00	700.00	
105	Port Collar Opening Tool				1	400.00	400.00T	
150	Stripper Rubber				1	100.00	100.00T	
330	Swift Multi-Density				225	9.50	2,137.50T	
276	Flocele				56	0.90	50.40T	
581D	Service Charge Cement				225	1.00	225.00	
583D	Drayage				334.89	0.75	251.17	
	Subtotal						3,939.07	
	Sales Tax						5.30%	142.46
Pd 8-1-02 Cement 2350								
Thank you for your business.						Total	\$4,081.53	



CHARGE TO:
CASTLE RESOURCES
 ADDRESS
 CITY, STATE, ZIP CODE

TICKET
 No 4651

PAGE 1 OF 1

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 1	LEASE NORTH	COUNTY/PARISH RUSH	STATE KS	CITY	DATE 7-10-02	OWNER SAME
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR PROFESSIONAL PULLING SVC		RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO HOUSTON	ORDER NO.	
WELL TYPE OTL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE CEMENT PORT COLLAR		WELL PERMIT NO.	WELL LOCATION MCKEAN JCT - 3E, 3/4N, ES		
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

ORGINA

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
575		1			MILEAGE # 104	30		ME		2.50	75.00	
577		1			PUMP SERVICE	1		JOB		700.00	700.00	
105		1			PORT COLLAR OPENING TOOL	1		JOB		400.00	400.00	
150		1			SHREDDER RUBBER	1		EA		100.00	100.00	
330		1			SWIFT MULE - DESIGN STANDARD	225		SKS		9.50	2137.50	
276		1			FLOCLE	56		LBS		.90	50.40	
581		1			SOURCE CHARGE CEMENT	225		SKS		1.00	225.00	
583		1			DEBRAGE	22326		LBS	334.89	1M	.75	251.17

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X
 DATE SIGNED 7-10-02 TIME SIGNED 1030 A.M. P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	3939.07
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	142.46
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	4081.53
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR
 WAYNE WOOD APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc. ORIGINAL

DATE 7-10-02 PAGE NO. 1

CUSTOMER CASTLE RESOURCES WELL NO. 41 LEASE NORTH JOB TYPE CMT PORT COLLAR TICKET NO. 4651

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1000							ON LOCATION
								PORT COLLAR = 2112'
								2 7/8 x 5 1/2
	1110				✓		1000	PST-TEST - HCU
	1112	3	3	✓		300		OPEN PORT COLLAR - 225 SKS - GET WATER
			130	✓				MIX CEMENT - 225 SKS SINK 1/4 FLOOR (145 BBS LTR)
	1240		12.2					FINISH MIXING - 225 SKS - CIRCULATE 3 SKS CMT TO PCT
	1245						1000	CLOSE PORT COLLAR - PST TEST
					✓			RUN 3 JTS - CIRCULATE CLEAN
								WASH-UP
								BACK-UP
	1330							JOB COMPLETE
								OK BY STATE KOC
								WELL DOB NOT CIRCULATE W/ 225 SKS - PUMP 30 BBL H2O TO O.K.
								THANK YOU
								WANN, DUSTY, DERRICK

SWIFT SERVICES, INC.

PO BOX 466

NESS CITY, 67560-0466

181204
LONG STAIN
Cement

ORIGINAL
Invoice

DATE	INVOICE #
7/4/02	4493

BILL TO
Castle Resources Inc. PO Box 87 Schoenchen, KS 67667

RECEIVED
OCT 24 2002
KCC WICHITA

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Operator	Job Purpose
Net 30	1	North	Ness		Oil	Development	Lenny	L/S

PRICE REFERE...	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
575D	Milage	30	2.50	75.00
578D	Pump Charge	1	1,200.00	1,200.00
281	Mud Flush	500	0.50	250.00T
400-5	5 1/2" Guide Shoe	1	80.00	80.00T
401-5	5 1/2" Insert Float with Auto Fill	1	110.00	110.00T
402-5	5 1/2" Centralizers	5	40.00	200.00T
403-5	5 1/2" Cement Basket	2	110.00	220.00T
404-5	5 1/2" Port Collar	1	1,500.00	1,500.00T
410-5	Top Plug	1	50.00	50.00T
325	Cement	175	6.75	1,181.25T
284	Calseal	8	25.00	200.00T
283	Salt	850	0.15	127.50T
290	D-Air	41	2.75	112.75T
286	Halad-1	82	5.25	430.50T
276	Flocele	50	0.90	45.00T
581D	Service Charge Cement	175	1.00	175.00
583D	Drayage	274.1	0.75	205.58
	Subtotal			6,162.58
	Sales Tax		4.90%	220.84

*pd 8-1-02
C/C # 2350*

Thank you for your business.	Total	\$6,383.42
------------------------------	--------------	------------



CHARGE TO: *Castle Resources*

ADDRESS:

CITY, STATE, ZIP CODE:

TICKET No. 4493

PAGE 1 OF 2

1. SERVICE LOCATIONS <i>GINA</i>	WELL/PROJECT NO. <i>1</i>	LEASE <i>Nodds</i>	COUNTY/PARISH <i>Ness</i>	STATE <i>KS</i>	CITY	DATE <i>7-4-02</i>	OWNER <i>Same</i>
2. <i>GINA</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR		RIG NAME/NO. <i>A+A</i>	SHIPPED VIA <i>105</i>	DELIVERED TO <i>N.E. Mcraiker</i>	ORDER NO.
3. <i>GINA</i>	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>U/S</i>	WELL PERMIT NO.		WELL LOCATION	
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	UM	QTY.	UM	
575					MILEAGE	30	mi		2.50	75.00
578	RECEIVED OCT 24 2002 KCC WICHITA				Pump Chngs	1	EA	3950	FT	1200.00
281					Mud Flush	500	Gal			250.00
400					Guide shoe	1	EA	5/8	in	80.00
401					meat float	1	EA			110.00
402					Centralizer	5	EA			200.00
403					Cement Baskets	2	EA			220.00
404					Port Collar	1	EA			1500.00
410					Top Ply	1	EA			50.00
				<i>From continuation</i>						2477.58

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *[Signature]*

DATE SIGNED: *7-4-02* TIME SIGNED: *11:00* A.M. P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				6162.58
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX 220.84
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL 6383.42
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket

SWIFT OPERATOR: *[Signature]*

APPROVAL:

Thank You!

JOB LOG

SWIFT Services, Inc ORIGINAL

DATE 7-4-07 PAGE NO. 7

CUSTOMER: Castle Res. WELL NO. 1 LEASE North JOB TYPE H/S TICKET NO. 4493

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
7-4	2300							on loc. Logging
7-5	0145							ST 15.5# 5/2 CSC
								Run Guide S Loc, insert float
								Baskets on JT 5 & 44
								Cent on Collars 1, 3, 7, 15, 43
								Port collar on JT 44
	0300							Csg on bottom Circ w/mud
	0400							final circ
								Plug Retrols w/15 SKS CH7
								ST 500 gal mud flush
								ST mix 175 SKS EA-2
								final mix washout P+L
	0430		93.7				1300	ST Disp
								Plug Down
								Job complete

RECEIVED
OCT 24 2007
KCC WICOMTA