

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED
AUG 23 2002
8-23-02
KCC WICHITA

Operator: License # 31021
Name: Castelli Exploration, Inc.
Address: 6908 NW 112th Street
City/State/Zip: Oklahoma City, OK 73162
Purchaser: _____
Operator Contact Person: Tom Castelli
Phone: (405) 722-5511
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Jim Hendricks
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. _____
07-17-02 07-28-02 7-29-02
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

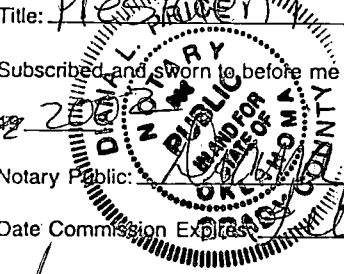
API No. 15 - 033-21324-00-00
County: Comanche County, Kansas
SW NE SW Sec. 21 Twp. 33 S. R. 16 East West
1550 feet from (S) N (circle one) Line of Section
1700 feet from E / (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Dorsey Trust Well #: 1-21
Field Name: _____
Producing Formation: _____
Elevation: Ground: 1815' Kelly Bushing: 1828'
Total Depth: 5075' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 1211 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 cmt.
Drilling Fluid Management Plan Per API Std 9-6-02
(Data must be collected from the Reserve Pit)
Chloride content 7800 ppm Fluid volume 150 bbls
Dewatering method used evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

RECEIVED
SEP 12 2002
KCC WICHITA

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: Thomas J. Castelli
Title: President Date: 8/13/02
Subscribed and sworn to before me this 13th day of August
Notary Public: S. Price
Date Commission Expires: February 10, 2005



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



Operator Name: **Castelli Exploration, Inc.** Lease Name: **Dorsey Trust** Well #: **1-21**
 Sec. **21** Twp. **33** S. R. **16** East West County: **Comanche County, Kansas**

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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:	<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>4120'</td> <td></td> </tr> <tr> <td>Lansing</td> <td>4311'</td> <td></td> </tr> <tr> <td>Pawnee</td> <td>4896'</td> <td></td> </tr> <tr> <td>Ft Scott</td> <td>4936'</td> <td></td> </tr> <tr> <td>Mississippian</td> <td>4999'</td> <td></td> </tr> </table>	Name	Top	Datum	Heebner	4120'		Lansing	4311'		Pawnee	4896'		Ft Scott	4936'		Mississippian	4999'	
Name	Top	Datum																	
Heebner	4120'																		
Lansing	4311'																		
Pawnee	4896'																		
Ft Scott	4936'																		
Mississippian	4999'																		

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	# Sac's Used	Type and Percent Additives
Conductor	17-1/2"	13-3/8"		328'	ALW Class A	150 100	3%cc 1/2# flo seal 3%cc 2%gel
Surface	12-1/4"	8-5/8"	24#	1211'	Class A	700	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 checked="" 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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

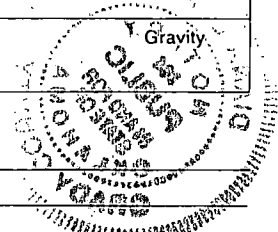
TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
---------------	------	--------	-----------	--

Date of First, Resumerd Production, SWD or Enhr.	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	METHOD OF COMPLETION	Production Interval
--------------------	----------------------	---------------------

- Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If Vented, Sumit ACO-18.) Other (Specify) _____





TREATMENT REPORT

Customer ID		Date	
Customer <i>CASPER EXP.</i>		<i>7-29-02</i>	
Lease <i>DORSEY TRUST</i>		Lease No.	Well # <i>1-21</i>
Field Order # <i>4963</i>	Station <i>PRATT, KS.</i>	Casing	Depth
Type Job <i>PTA - NEW WELL</i>	Formation <i>TD 5075'</i>	County <i>COMANCHE</i>	State <i>KS.</i>
Legal Description <i>21-33-16</i>			

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft				RATE	PRESS	ISIP
Depth	Depth	From	To	Acid <i>115 SK. 60/40 P07</i>	Max			5 Min.
Volume	Volume	From	To	Free Acid <i>6% GEL</i>	Min			10 Min.
Max Press	Max Press	From	To	Free <i>13.3 PPG</i>	Avg			15 Min.
Well Connection	Annulus Vol.	From	To	<i>1.60 #3/SK</i>	HHP Used			Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume			Total Load

Customer Representative <i>B. ROTH</i>	Station Manager <i>D. AUSTIN</i>	Treater <i>K. GORDON</i>
---	-------------------------------------	-----------------------------

Service Units	<i>107</i>	<i>35</i>	<i>57</i>	<i>44</i>	<i>77</i>
---------------	------------	-----------	-----------	-----------	-----------

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>0530</i>			<i>RECEIVED</i>		<i>ON LOCATION</i>
			<i>AUG 23 2002</i>		
<i>0715</i>			<i>KCC WICHITA</i>		<i>1st Plug AT 1240' w/50 SK. CEMENT</i>
			<i>10</i>	<i>6</i>	<i>BROAD CORE</i>
			<i>14</i>	<i>6</i>	<i>PUMP 50 SK. CEMENT</i>
			<i>13</i>	<i>6</i>	<i>PUMP 13 bbl. DISP.</i>
<i>0745</i>					<i>2nd Plug AT 250' w/30 SK. CEMENT</i>
			<i>5</i>	<i>4</i>	<i>BROAD CORE</i>
			<i>8 1/2</i>	<i>4</i>	<i>PUMP 30 SK. CEMENT</i>
			<i>1</i>	<i>4</i>	<i>PUMP 1 bbl. DISP.</i>
<i>0830</i>					<i>3rd Plug AT 40' w/10 SK. CEMENT</i>
			<i>3</i>	<i>3</i>	<i>BROAD CORE</i>
					<i>PUMP 10 SK. CEMENT</i>
					<i>CORE CEMENT TO SURFACE</i>
			<i>4 1/2</i>	<i>2</i>	<i>Plug Part Hole w/15 SK. CEMENT</i>
			<i>3</i>	<i>2</i>	<i>Plug Mouse Hole w/10 SK. CEMENT</i>
<i>0900</i>					<i>JOB COMPLETE</i>
					<i>THANKS - KEVIN</i>



INVOICE NO.

Subject to Correction

FIELD ORDER

Date 7-29-02	Lease DORSEY TRUST	Well # 1-21	Legal 21-33-16
Customer ID	County PERMANENTE	State KS	Station PRATT, KS
Depth		Formation	Shoe Joint
Casing		Casing Depth 5075'	Job Type PTA-NEW WELL
Customer Representative B. ROTHER		Treater K. GORDLEY	

CHARGE

AFE Number	PO Number	Materials Received by X <i>[Signature]</i>
------------	-----------	---

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D203	115 SK	60/40 POZ CEMENT ✓				
C321	396 lb.	CEMENT GEL ✓				
RECEIVED						
AUG 23 2002						
KCG WICHITA						
E107	115 SK	CEMENT SERV. CHARGE				
E100	60 mile	UNITS MILES				
E104	297 TM	TONS MILES				
R400	1 EA.	EA. PTA PUMP CHARGE				
		PRICE =		1773.00		
		PLUS TAX				

10244 NE Hiway 61 · P.O. Box 8613 · Pratt, KS 67124-8613 · Phone (620) 672-1201 · Fax (620) 672-5383

TOTAL