

LFASE NAME Lemon

WELL NUMBER 1

1650 Ft. from S Section Line

1980 Ft. from E Section Line

SEC. 5 TWP. 27 RGE. 13 (E) or (W)

COUNTY Pratt

Date Well Completed _____

Plugging Commenced 11-10-93

Plugging Completed 11-11-93

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

LEASE OPERATOR Castle Resources, Inc.

ADDRESS 1200 E. 27th #C, Hays, Kansas 67601

PHONE# (913) 625-5155 OPERATORS LICENSE NO. 9860

Character of Well Oil

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

The plugging proposal was approved on 11-08-93 (date)

by Duane Rankin (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top 3874 Bottom 4258 T.O. 4525

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

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
		Top		10 3/4	447	
				4 1/2	4502	2523

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
 Bottom plug: sanded back to 3825' bailed 4 sacks of cement

Top plug: pumped 300 lbs. of hulls, 10 sacks of gel, 50 sacks of cement, 10 sacks of gel, 100 lbs. of hulls, released plug, pumped 150 sacks of cement, 60/40 poz. 6% gel, max. pressure 300 lbs. shut in pressure 100 lbs.

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License No. 6901

Address P.O. Box 231, Claflin, Kansas 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Castle Resources, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

RECEIVED
 STATE CORPORATION COMMISSION

Joseph F. Strube (Employee of Operator) or _____

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

(Signature) Joseph F. Strube

(Address) P.O. Box 231, Claflin, Kansas 67525

NOV 24 1993

CONSERVATION DIVISION
 Wichita, Kansas

SUBSCRIBED AND SWORN TO before me this 23 day of November, 1993

Karlynn K. Beck
 Notary Public

My Commission Expires: 09-21-94

USE ONLY ONE SIDE OF EACH FORM

