

Kansas Corporation Commission Oil & Gas Conservation Division

1053764

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R 🗌 East 🗌 West
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
☐ New Well ☐ Re-Entry ☐ Workover	Total Depth: Plug Back Total Depth:
□ Oil □ WSW □ SWD □ SIOW	Amount of Surface Pipe Set and Cemented at: Feet
☐ Gas ☐ D&A ☐ ENHR ☐ SIGW	Multiple Stage Cementing Collar Used? Yes No
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt.
If Workover/Re-entry: Old Well Info as follows:	· ·
Operator:	Drilling Fluid Management Plan
Well Name:	(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: ppm Fluid volume: bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD	Dewatering method used:
Conv. to GSW	
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec TwpS. R
ENHR Permit #:	
GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY									
Letter of Confidentiality Received									
Date:									
Confidential Release Date:									
Wireline Log Received									
Geologist Report Received									
UIC Distribution									
ALT I II III Approved by: Date:									

Side Two



Operator Name:			Lease Name	e:			_ Well #:				
Sec Twp	S. R	East West	County:								
time tool open and clos	sed, flowing and shut s if gas to surface tes	I base of formations per in pressures, whether s it, along with final chart well site report.	shut-in pressure	reached s	static level,	hydrostatic press	sures, bottom h	ole temperature, fl			
Orill Stem Tests Taken (Attach Additional S		Yes No		Log	Formatio	n (Top), Depth an	d Datum	Sample			
Samples Sent to Geolo		☐ Yes ☐ No	N	lame			Тор	Datum			
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	Yes No Yes No Yes No										
List All E. Logs Run:			RECORD [Used						
	Size Hole	Report all strings set- Size Casing	-conductor, surface Weight		ate, producti Setting	on, etc. Type of	# Sacks	Type and Percen			
Purpose of String Drilled		Set (In O.D.)	Lbs. / Ft.		Depth	Cement	Used	Additives			
		ADDITIONA	L OFMENTING (00115575	DECORD						
		ADDITIONA	L CEMENTING / :	SQUEEZE	RECORD						
Purpose: Depth Type of Cement Perforate Protect Casing Plug Back TD Plug Off Zone			# Sacks Used	d	Type and Percent Additives						
Shots Per Foot		ON RECORD - Bridge Plu ootage of Each Interval Pe				cture, Shot, Cement mount and Kind of Ma	•	d Depth			
TUBING RECORD:	Size:	Set At:	Packer At:	Line	r Run:	Yes No					
Date of First, Resumed I	Production, SWD or ENI	HR. Producing Me	thod:	Gas Li	ift C	Other (Explain)					
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water	В	bls. (Gas-Oil Ratio	Gravity			
DISPOSITIO	Used on Lease	Open Hole	Perf. D	METHOD OF COMPLETION: Perf. Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)							
(If vented, Sub	mit ACO-18.)	Other (Specify)									

Form	ACO1 - Well Completion
Operator	American Warrior, Inc.
Well Name	Evel 1-21
Doc ID	1053764

Tops

Name	Тор	Datum
Anhydrite	1511	714
Heebner	3675	-1454
Lansing	3725	-1500
ВКС	4048	-1823
Pawnee	4127	-1902
Ft. Scott	4209	-1984
Cherokee	4230	-2005
Mississippian	4299	-2074
TD	4326	-2101



SERVICE LOCATIONS

N. X

REFERRAL LOCATION

INVOICE INSTRUCTIONS

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		Description of Mr. Bu, la, Barre	NA PA	Dogwood		SALES
	ORDER NO.	SHIPPED DELIVERED TO	SHIPPED	RIG NAME NO.	i di	TICKET TYPE CONTRACTOR
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OWNER	DATE	CULA	STATE	COUNTYPARISH	LEASE	WELL/PROJECT NO.
PAGE * OF					CITT, STATE, ZIP CODE	Inc.
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SWIFT Services, Inc. DATE DE OF 10 PAGE **JOB LOG** CUSTOMER AW/ JOB TYPE PTA WELL NO. PUMPS PRESSURE (PSI) RATE (BPM) **DESCRIPTION OF OPERATION AND MATERIALS** 0030 DNEDAMON CMT: 240 40 60-40 44/201 /4+ FW D.P-1/2 Hon 77/8 LET PLAN CE 1590 5000 **ો**એ CMT 2215 ノブひ MUD Dro five @ 810# 80 sus 21/5 60 210 <u>کی ترح</u> 3.0 ParD.P. Burkeye 240 4 40sm 2315 20 105 2320 Pur AP, LAYWWW Meer, MH 00/5 4" Pine 60FF 20SA RH JOSAS 0050 010 5,2 MAN DUSMS TOTAL CONT 240 SAS JOB COMPLETE 0115 THAMYOU DAV. JULE DIZ



WELL/PROJECT NO.

REFERRAL LOCATION

TICKET TYPE CONTRACTOR

| SERVICE | SALES | STORY | CATEGORY | JOB PUI
| WELL TYPE | WELL CATEGORY | JOB PUI

EVEL

1-21

NESS RIG NAME/NO. COUNTY/PARISH

SHIPPED DELIVERED TO

ORDER NO.

DATE

OWNER

WELL PERMIT NO.

WELLICKATION

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JOB PURPOSE

CEMENT & 78 SURFART

CITY, STATE, ZIP CODE

TICKET 18027

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	X DATE SIGNED ATTERIGNED TIME SIGNED TIME SIGNED	LIMITED WARRANTY provisions.	LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to DAYMENT DELEGATE INCLUDE.				SBR	S81	385		ダ90	279	278	576S	575	REFERENCE SECONDARY REFERENCES PART NUMBER	ATION
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CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.	·	SWIFT SERVICES, INC.	REMIT PAYMENT TO:				MINIMUM DRAMAGE	SERVICE CHARGE CEMENT	STANDARD CENEUT		D-AIR	GE/	CALCILITY ON LINE	Pump MARGE	MILEAGE \$ ///)F DESCRIPTION	
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Thank You!

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CUSTOMER	WHIN WARRIOR		WELL NO.			LEASE EVE	EL 1-	21 JOB TYPE (ENGLY 878 TICKET NO. 18937
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUN	IPS C	PRESSUR TUBING		DESCRIPTION OF OPERATION AND MATERIALS
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Hard Rock Consulting, Inc.

Jason Alm Petroleum Geologist P.O. Box 1260 Hays, KS 67601

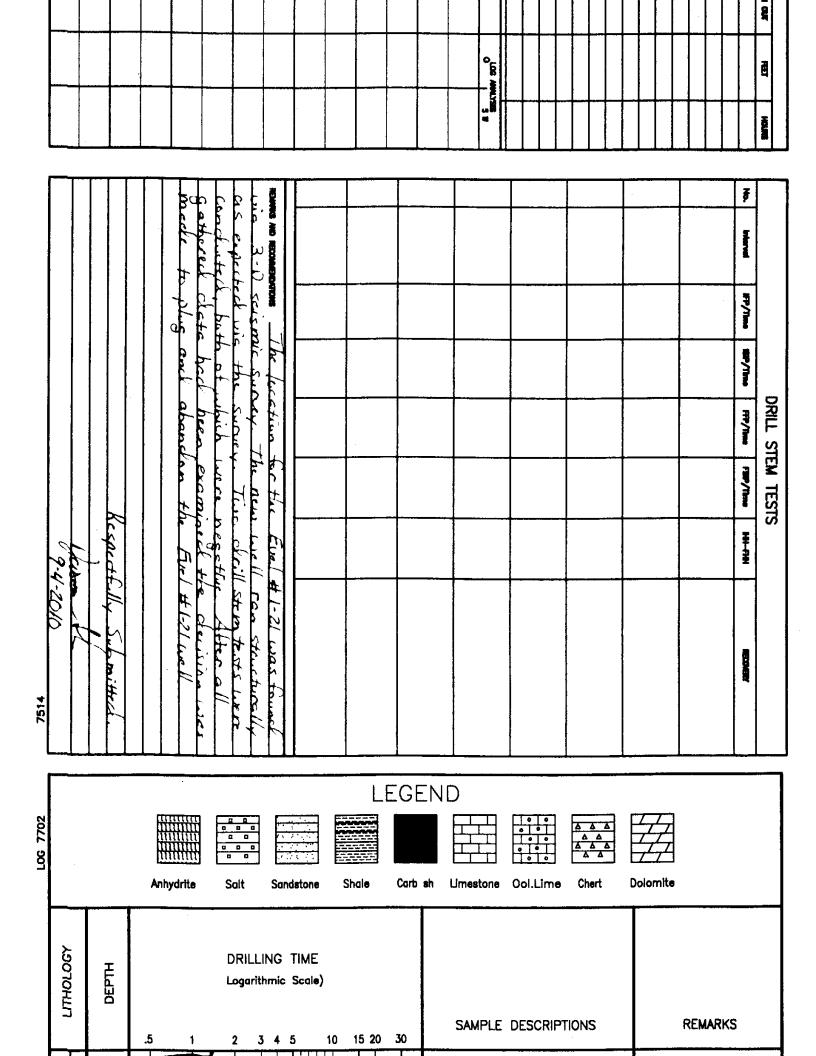
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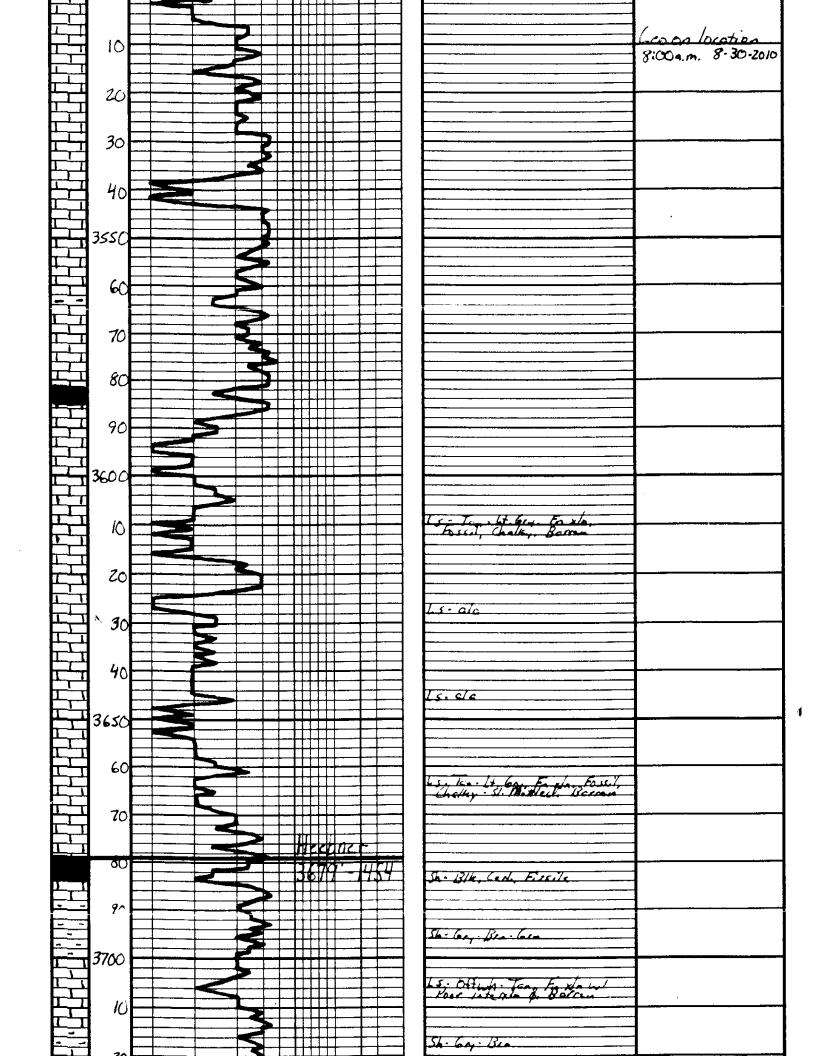
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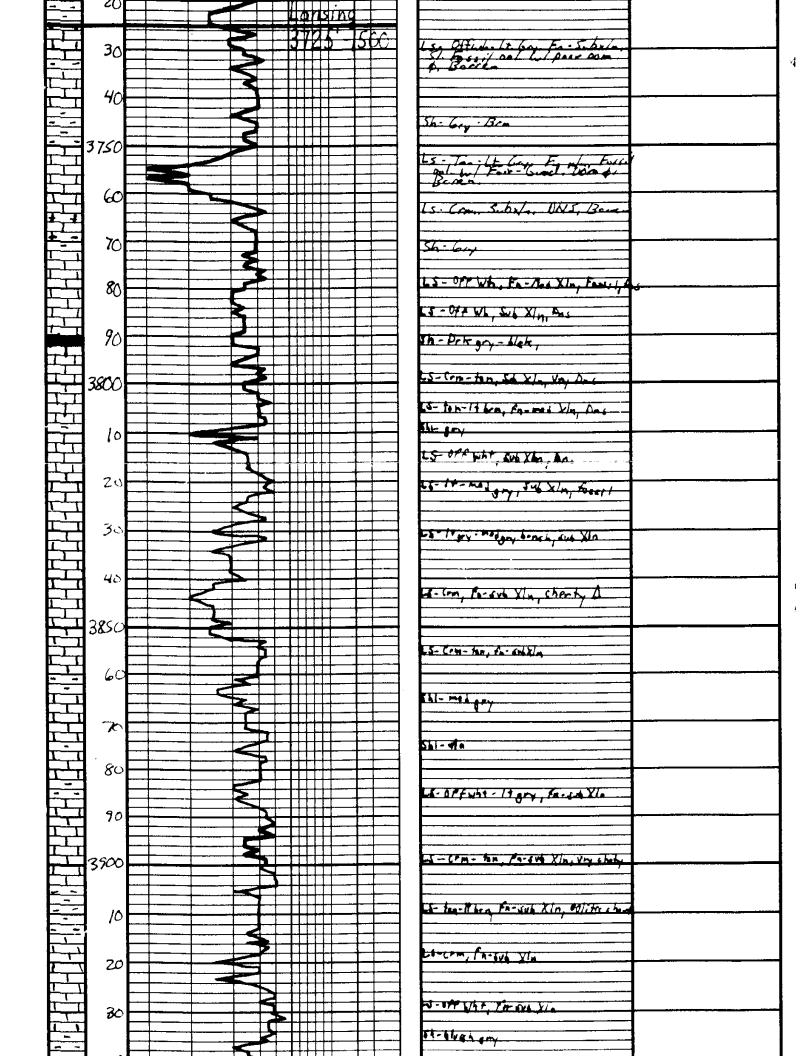
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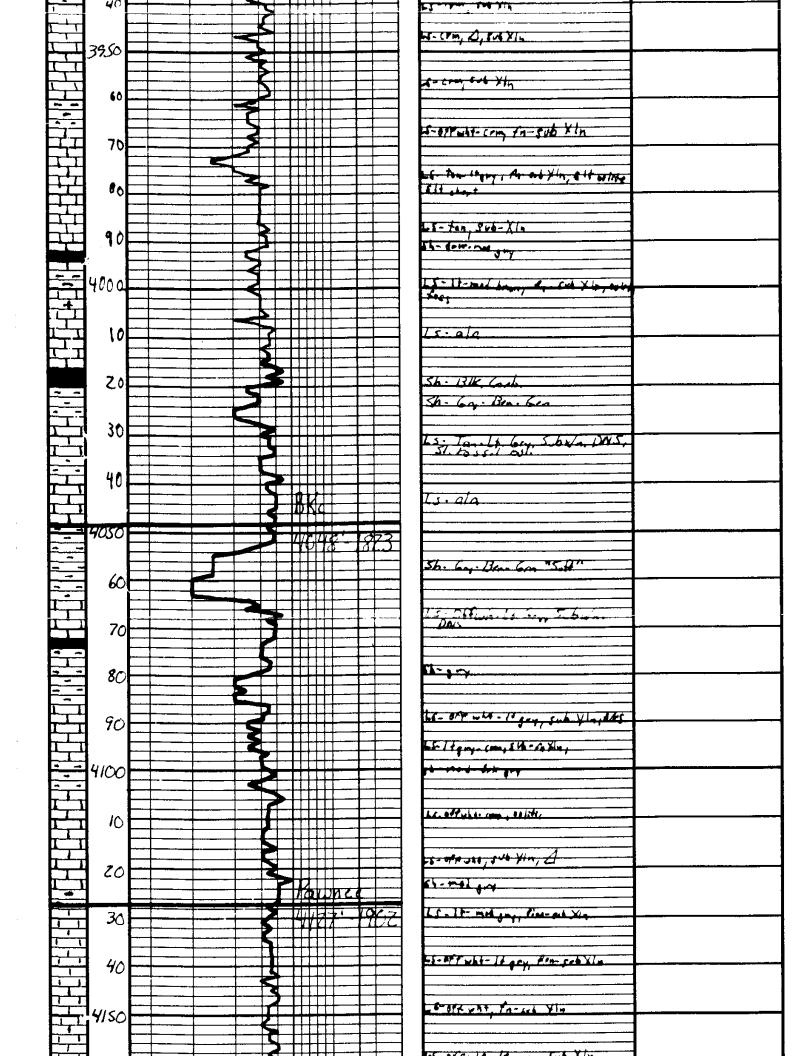
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	ණ												La-ore whit, soh XIm, sh t A	DST#1 mississippion 4257'-4321'
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	80 %						-	010			9//		Shabuitt caloud, calous ben, may gry The body - Bon-Bon, A. Sel Latt	DST#1 mississippien 4257'-4321' 30"-30"-10" IH 2139#
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	80 90 4300 10					7	-			20	9//		Shabuitt caloud, calous ben, may gry The body - Bon-Bon, A. Sel Latt	DST#1 mississippion 4257'-4321' 30"-30"-10" IH 2134# IF 21-24# Built to 12 in.
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	80 90 4300 10							67		3	74 74	•	Show He was properly so the sea of the sea o	DST#1 Mississipping 4257'-4321' 30"-30"-10" IH 2139# IF 21-24# 10 1/2 in. ISI 168# Built to 1/2 in. ISI 168# BHT 144* Kecouny: 15'01 Spd. Mul DST#2 Mississipping 4256'-4326'
	80 90 4300 10							67		3	74 74	•	Showith colored, colored bearing on the Showith colored, colored bearing on the Showing of the S	DST#1 Mississippion 4257'-4321' 30"-30"-10" IH 2134# IF 21-24# Built to 12 in. ISI 168# Peacl FF 25# BHT 114"F Kecoury: 15'01 5pd. Mcl DST#2 Mississippion 4256'-4326' 45".45".45".45".45"
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	80 90 4300 10							67		3	74 74	•	Showith colored, colored bearing on the Showith colored, colored bearing on the Showing of the S	DST#1 Mississipping 4257'-4321' 30"-30"-10" IH 2139# IF 21-24# rorein. ISI 168# Dead FF 25# BHT 144"F Recounty: 15'01 Spd. Mul DST#2 Mississipping 4256'-4326' 45" 45" 45" 45" 45" IF 23-58# BUILT 147# IF 23-58# BUILT 16 6-5in.
	80 90 4300 10							67		3	74 74	•	Showith colored, colored bearing on the Showith colored, colored bearing on the Showing of the S	DST#1 Mississipping 4257'-4321' 30"-30"-10" IH 2139# IF 21-24# 70 72 in. ISI 768# Built 70 72 in. ISI 768# BHT 144°F Keccouny: 15'01 Sput. Much DST#2 Mississipping 4256'-4326' 45".45".45".45" IH 2147# IF 23-58# Builto 6.5 in.

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American Warrior, Inc.

Evel #1-21

PO Box 399 Garden City Ks

21-18s-22w Ness Ks

67846

Job Ticket: 40338 DST#: 1

ATTN: Jason Alm

Test Start: 2010.08.31 @ 21:38:26

GENERAL INFORMATION:

Formation: Miss.

Deviated: Test Type: Conventional Bottom Hole No Whipstock: ft (KB)

Time Tool Opened: 00:19:26 Time Test Ended: 03:17:56

Tester: Brett Dickinson

Unit No:

4257.00 ft (KB) To 4320.00 ft (KB) (TVD) Reference Elevations:

2225.00 ft (KB) 2217.00 ft (CF)

Total Depth: Hole Diameter:

4320.00 ft (KB) (TVD) 7.88 inches Hole Condition:

KB to GR/CF: 8.00 ft

Serial #: 8369 Press@RunDepth:

Outside

24.01 psig @

4258.02 ft (KB)

Capacity:

8000.00 psig

2010.09.01

Start Date: Start Time:

Interval:

2010.08.31 21:38:31

End Date: End Time: 2010.09.01 03:17:55 Last Calib.: Time On Btm:

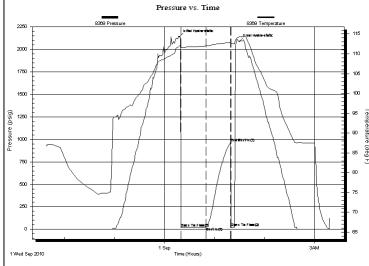
2010.09.01 @ 00:17:56

Time Off Btm:

2010.09.01 @ 01:29:56

TEST COMMENT: IF-1/2in blow died back to 1/4in blow

ISI-No blow FF-No blow



	PRESSURE SUMMARY									
Ī	Time	Pressure	Temp	Annotation						
	(Min.)	(psig)	(deg F)							
	0	2139.11	112.00	Initial Hydro-static						
	2	21.34	111.55	Open To Flow (1)						
	32	24.01	111.98	Shut-In(1)						
Ţ	61	967.71	112.87	End Shut-In(1)						
empe	62	25.08	112.62	Open To Flow (2)						
Temperature (deg F)	72	2089.02	114.24	Final Hydro-static						
(deq										
ŋ										

Recovery

Length (ft)	Description	Volume (bbl)
15.00	Oilspotted mud	0.21
-	-	

Gas Rat	es	
Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

Trilobite Testing, Inc. Ref. No: 40338 Printed: 2010.09.01 @ 08:21:36 Page 1



FLUID SUMMARY

American Warrior, Inc.

Evel #1-21

PO Box 399 Garden City Ks 67846

Serial #:

Job Ticket: 40338

21-18s-22w Ness Ks

DST#: 1

ATTN: Jason Alm

Test Start: 2010.08.31 @ 21:38:26

Mud and Cushion Information

Mud Type: Gel Chem Cushion Type: Oil API: deg API Mud Weight: Cushion Length: 10.00 lb/gal Water Salinity: ft ppm

Viscosity: 66.00 sec/qt Cushion Volume: bbl

11.99 in³ Gas Cushion Type:

Resistivity: Gas Cushion Pressure: ohm.m psig

4300.00 ppm Salinity: Filter Cake: inches

Recovery Information

Water Loss:

Recovery Table

Length ft	Description	Volume bbl
15.00	Oilspotted mud	0.210

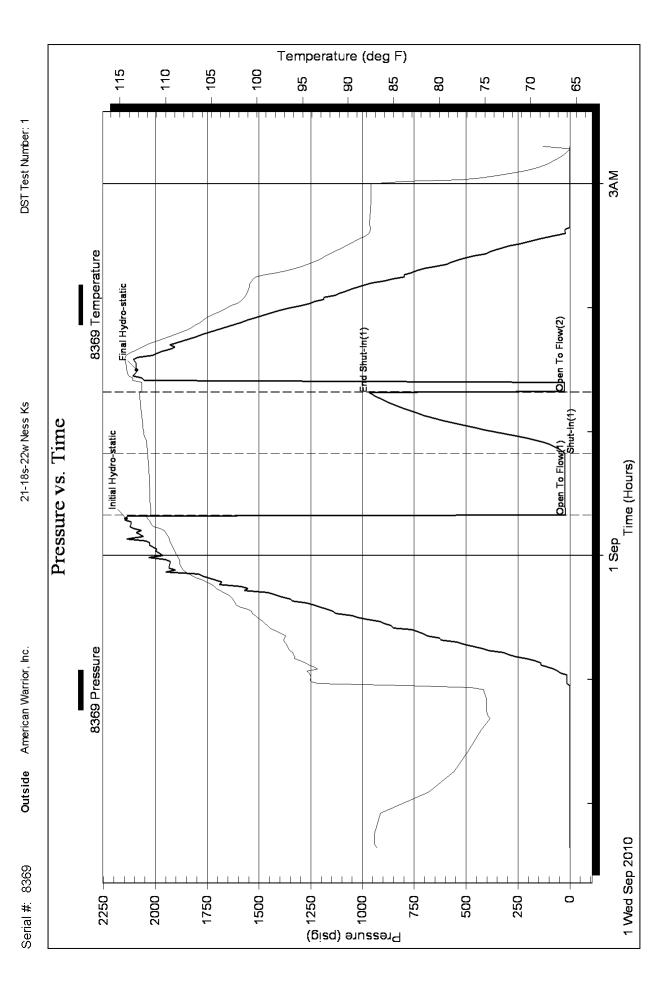
Total Volume: Total Length: 15.00 ft 0.210 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0

Laboratory Name: Laboratory Location:

Recovery Comments:

Trilobite Testing, Inc Ref. No: 40338 Printed: 2010.09.01 @ 08:21:37 Page 2



Page 3 Printed: 2010.09.01 @ 08:21:37 40338



American Warrior, Inc.

Evel #1-21

PO Box 399 Garden City Ks 67846

Job Ticket: 40339

21-18s-22w Ness Ks

. . . .

DST#: 2

2225.00 ft (KB)

ATTN: Jason Alm

Test Start: 2010.09.01 @ 08:13:42

GENERAL INFORMATION:

Formation: Miss.

Total Depth:

Deviated: No Whipstock: ft (KB) Test Type: Conventional Bottom Hole

Time Tool Opened: 10:48:12 Tester: Brett Dickinson

Time Test Ended: 15:42:42 Unit No:

Interval: 4256.00 ft (KB) To 4326.00 ft (KB) (TVD) Reference Elevations:

4326.00 ft (KB) (TVD) 2217.00 ft (CF)

Time

Hole Diameter: 7.88 inches Hole Condition: KB to GR/CF: 8.00 ft

Serial #: 8369 Outside

Press@RunDepth: 89.93 psig @ 4257.02 ft (KB) Capacity: 8000.00 psig

 Start Date:
 2010.09.01
 End Date:
 2010.09.01
 Last Calib.:
 2010.09.01

 Start Time:
 08:13:47
 End Time:
 15:42:41
 Time On Btm:
 2010.09.01 @ 10:47:12

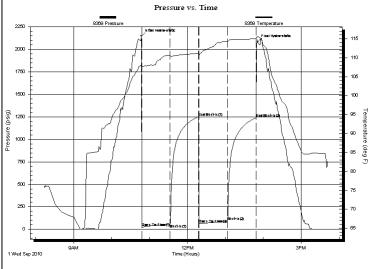
Time Off Btm: 2010.09.01 @ 13:51:12

PRESSURE SUMMARY

Pressure Temp Annotation

TEST COMMENT: IF-6.5in blow

ISI-No Blow FF-1.5in blow FSI-No blow



	(Min.)	(psig)	(deg F)	
	0	2147.27	108.08	Initial Hydro-static
	1	23.75	107.50	Open To Flow (1)
	46	58.10	110.49	Shut-In(1)
7	91	1251.68	111.16	End Shut-In(1)
empe	91	64.55	110.50	Open To Flow (2)
Temperature (deg	137	89.93	114.27	Shut-In(2)
(deg	182	1239.59	114.97	End Shut-In(2)
F)	184	2083.93	115.67	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
25.00	VSOCM 5%O 95%M	0.35
60.00	Oilspotted VSWCM 5%W 95%M	0.84
60.00	VSWCM 15%W 85%M	0.84
-		

Gas Rates						
Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)				

Trilobite Testing, Inc Ref. No: 40339 Printed: 2010.09.01 @ 18:19:11 Page 1



FLUID SUMMARY

American Warrior, Inc.

Evel #1-21

PO Box 399 Garden City Ks

DST#: 2

67846

Job Ticket: 40339

Serial #:

21-18s-22w Ness Ks

ATTN: Jason Alm

Test Start: 2010.09.01 @ 08:13:42

Mud and Cushion Information

11.19 in³

4100.00 ppm

ohm.m

Mud Type: Gel Chem Cushion Type: Oil API: deg API Mud Weight: Cushion Length: 9.00 lb/gal Water Salinity: ft ppm

Viscosity: 47.00 sec/qt Cushion Volume: bbl

Gas Cushion Type:

Gas Cushion Pressure: psig

Filter Cake: inches **Recovery Information**

Water Loss:

Resistivity:

Salinity:

Recovery Table

Length ft	Description	Volume bbl
25.00	VSOCM 5%O 95%M	0.351
60.00	Oilspotted VSWCM 5%W 95%M	0.842
60.00	VSWCM 15%W 85%M	0.842

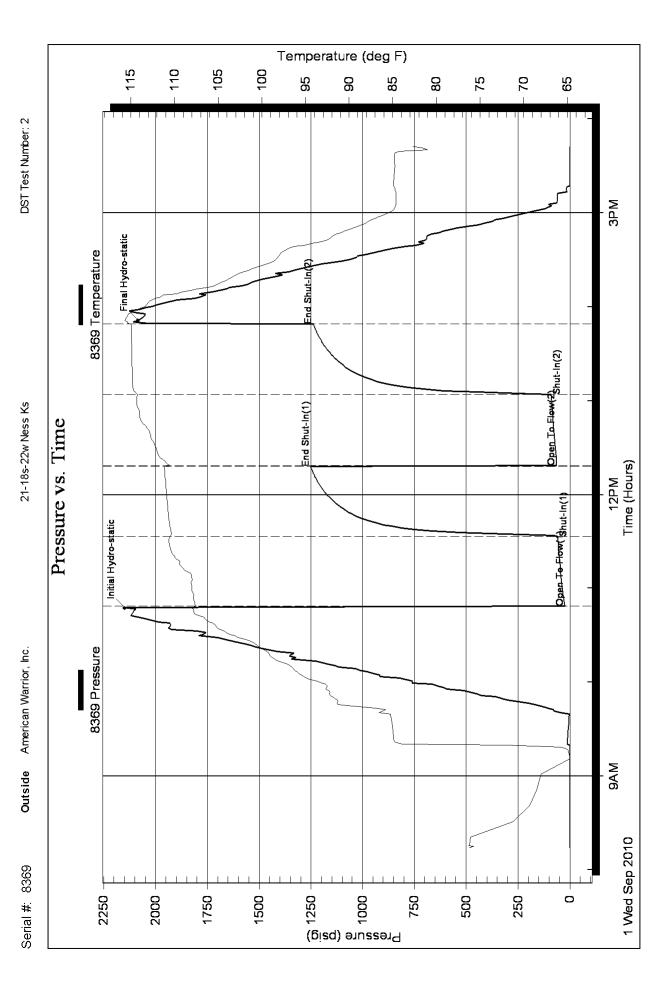
Total Length: 145.00 ft Total Volume: 2.035 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0

Laboratory Location: Laboratory Name:

Recovery Comments:

Trilobite Testing, Inc Ref. No: 40339 Printed: 2010.09.01 @ 18:19:12 Page 2



Page 3 Printed: 2010.09.01 @ 18:19:12 40339 Ref. No: