



KANSAS CORPORATION COMMISSION 1054105
OIL & GAS CONSERVATION DIVISION

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., 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 Conv. to SWD
- Conv. to GSW

Plug Back: _____ Plug Back Total Depth _____

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

ENHR Permit #: _____

GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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: _____



1054105

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	American Warrior, Inc.
Well Name	DSCOB Unit 1
Doc ID	1054105

Tops

Name	Top	Datum
Anhydrite	1384	753
Heebner	3614	-1477
Lansing	3660	-1523
BKC	3986	-1849
Pawnee	4068	-1931
Ft. Scott	4148	-2011
Cherokee	4168	-2031
Mississippian	4244	-2107
TD	4252	-2115



Services, Inc.

CHARGE TO: American Warrior
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET 18986

PAGE 1 OF 1

1. SERVICE LOCATIONS: *10010015* WEL/PROJECT NO. *1* LEASE *DESCOB* COUNTY/PARISH *MOO* STATE *KS* CITY *BARTON* DATE *21 SEP 10* OWNER _____

2. TICKET TYPE: SERVICE CONTRACTOR _____ RIG NAME NO. _____ ORDER NO. _____

3. SALES WEL TYPE _____ WEL CATEGORY *Production* JOB PURPOSE *Current deep sandline* WEL PERMIT NO. _____

4. REFERRAL LOCATION: _____ INVOICE INSTRUCTIONS: _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNT PRICE	AMOUNT
		LOC	ACCT	DF							
575					MILEAGE TRK 114	15	m			5.00	75.00
576 D					Rund Charges	1	ea			100.00	100.00
402					Conkards	85	in			250.00	100.00
410					TOP PLUG	85	in			100.00	100.00
412					Baffle Plate	85	in			100.00	100.00
330					SWD cement	40	skt			15.00	675.00
290					D-AIR	5	gal			35.00	175.00
276					Fluore	125	lbs			1.50	187.50
581					Service charge	450	skt			1.50	675.00
583					Dragee	44670	lb			1.00	336.90
581					MUD Flush	520	gal			1.00	500.00
581					KCL Flush	250	gal			2.00	500.00

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 CUSTOMERS AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: _____ TIME SIGNED: _____

A.M. P.M.

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

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? YES NO

WE UNDERSTOOD AND MET YOUR NEEDS? YES NO

OUR SERVICE WAS PERFORMED WITHOUT DELAY? YES NO

WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? YES NO

ARE YOU SATISFIED WITH OUR SERVICE? YES NO

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: _____ APPROVAL: _____

TOTAL: 10949.40

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 2/28/10 PAGE NO. 1

CUSTOMER American Well Inc WELL NO. #1 LEASE DSCOB JOB TYPE Drill deep surface TICKET NO. 18786

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								40 SACKS SMD w/ 1/4" flexible 8 5/8 23# 1400' pipe TD = 1400 - shoe joint 29' Centralizers 1, 3, 8, 28
	1500							on location begin Pump 8 5/8 casing
	1900							TRX 114 hook up to circulate
	1905	6 3/4	32				200	start flush - 500 gal and flush - 2000 KCL
	1930		47					Begin cement SMD @ 11.8 gal 100 sks
			57					SMD @ 12.8 gal 100 sks
			32					SMD @ 13.2 gal 100 sks
			26					SMD @ 15.7 gal 100 sks
		6 3/4	162				300	stop cement
	2000	6 3/4					300	start displacement
	2016	6 3/4	17				400	kick out ISIP 350 - holding skid in casing - cement to surface - 35 sks to put ← Wash up truck
	2040							job complete
								Plunk Blair Daw, Lane, Wayne



Services, Inc.

CHARGE TO: American Water
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET
 18992

PAGE 1 OF 2

1. SERVICE LOCATION: 1102 (15) 16 WELL PROJECT NO: 01 LEASE: DSCOB COUNTY/PARISH: NOO STATE: KS CITY: Bartonia DATE: 26 SEP 10 OWNER: _____

2. TICKET TYPE: SERVICE SALES CONTRACTOR: _____ RIG NAME NO: 23 SHIPPED DELIVERED TO: LOCATION ORDER NO: _____

3. WELL TYPE: _____ WELL CATEGORY: Development JOB PURPOSE: cement long string WELL PERMIT NO: _____ WELL LOCATION: 31-15-21 NS

4. REFERRAL LOCATION: _____ INVOICE INSTRUCTIONS: _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE TRK 14	20	mi			5.00	100.00
578		1			Pump Charge	1	ea			1400.00	1400.00
402		1			Centrafixer	5	in	5	ea	50.00	250.00
403		1			Cement Basket	1	ea	1	ea	200.00	200.00
416		1			Latchdown Pig & buffer	5	in	1	ea	225.00	225.00
407		1			Insert float shoe w/ 4th F.I.I	5	in	1	ea	275.00	275.00
419		1			Rotat. head reactor	5	in	1	ea	150.00	150.00

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

X DATE SIGNED: _____ TIME SIGNED: _____
 A.M. P.M.

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

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? YES NO

WE UNDERSTOOD AND MET YOUR NEEDS? YES NO

OUR SERVICE WAS PERFORMED WITHOUT DELAY? YES NO

WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? YES NO

ARE YOU SATISFIED WITH OUR SERVICE? YES NO

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL: 2625.00
 TAX: 71.50
 TOTAL: 2696.50

SWIFT OPERATOR: Mr Hill APPROVAL: _____

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 26 SEP 10 PAGE NO. 1

CUSTOMER American Warrior WELL NO. #1 LEASE DSCOB JOB TYPE cement long string TICKET NO. 18992

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								175 SKS EA-2 Cent 1, 2, 3, 4, 77 Basket #4 TD 4252 102 joints 15.5 # 5 1/2 Shoe joint 42.37
	0100							on loc TRIC 114 pulling pipe
	0210							start pipe in well 5 1/2 casing
	0340							Drop Ball - circulate ROTATE
	0405		12					Pump 500 gal MUDFLUSH
	0415		20					Pump 20 bbl KCL
	0430							Plug RH-MH (20SKS - 20SKS)
	0445	4 1/2	31			200		Mix cement 15SKS EA-2 15.4 ppm rotate wash out pump & line
	0505							Release latch down plug
	0510	6 3/4				200		Displace plug
	0530		100			1500		Plug down
						OK		Release pressure - held
	0540							Wash truck
	0600							Job Complete
								Ther ^{1/2} Dane, Blair & Russ



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 18992

CUSTOMER American Whittier
WELL DSC03
DATE 26 SEP 10
PAGE 2 OF 2

Item	Quantity	Unit	Weight	Volume	Value
STANDARD CONCRETE (FOR 4-2)	1	SK	175	1	2100.00
CEMENT	1	SK	850	1	840.00
SALT	1	LB	125	1	127.50
bolod 322	1	LB	50	1	875.00
Fluore.	1	LB	2	1	50.00
D-AIR	1	gal	35	1	70.00
MUDFLSH	1	gal	500	1	500.00
KCL Liquid	1	gal	25	1	50.00
582	1				250.00
581	1				262.50
TOTAL WEIGHT			175		
LOADED MILES				175	
CUBIC FEET			1		
TON MILES				175	
SERVICE CHARGE					250.00
TOTAL					4525.00



Services, Inc.

TICKET
18146

PAGE 1 OF 1

CHARGE TO: *Amirco Lubricants, Inc*
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

SERVICE LOCATIONS	WELL/PROJECT NO.	LEASE	COUNTY/PARISH	STATE	CITY	DATE	OWNER
1. <i>Thompson</i>	<i>41</i>	<i>D5 113 Unit</i>	<i>Ness</i>	<i>KS</i>		<i>9-28-10</i>	
2. <i>Ness City, KS</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO.	SHIPPED VA <input checked="" type="checkbox"/>	DELIVERED TO <i>S/Barrio, Inc</i>	ORDER NO.	
3.	WELL TYPE	WELL CATEGORY	JOB PURPOSE		WELL PERMIT NO.	WELL LOCATION	
4. REFERRAL LOCATION		<i>D.1</i>	<i>Revent Area 5 1/2 x 5 1/2</i>				

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575					MILEAGE <i>113</i>					500	10000
576 D					<i>Revent Charge - coal Area</i>					75000	750000
29D					<i>D. 1.2</i>					3500	70000
330					<i>SWD - cement</i>					1500	157500
376					<i>Flareole</i>					150	4500
571					<i>Service Charge - cement</i>					150	18750
582					<i>Maintenance Drags</i>					3500	350000

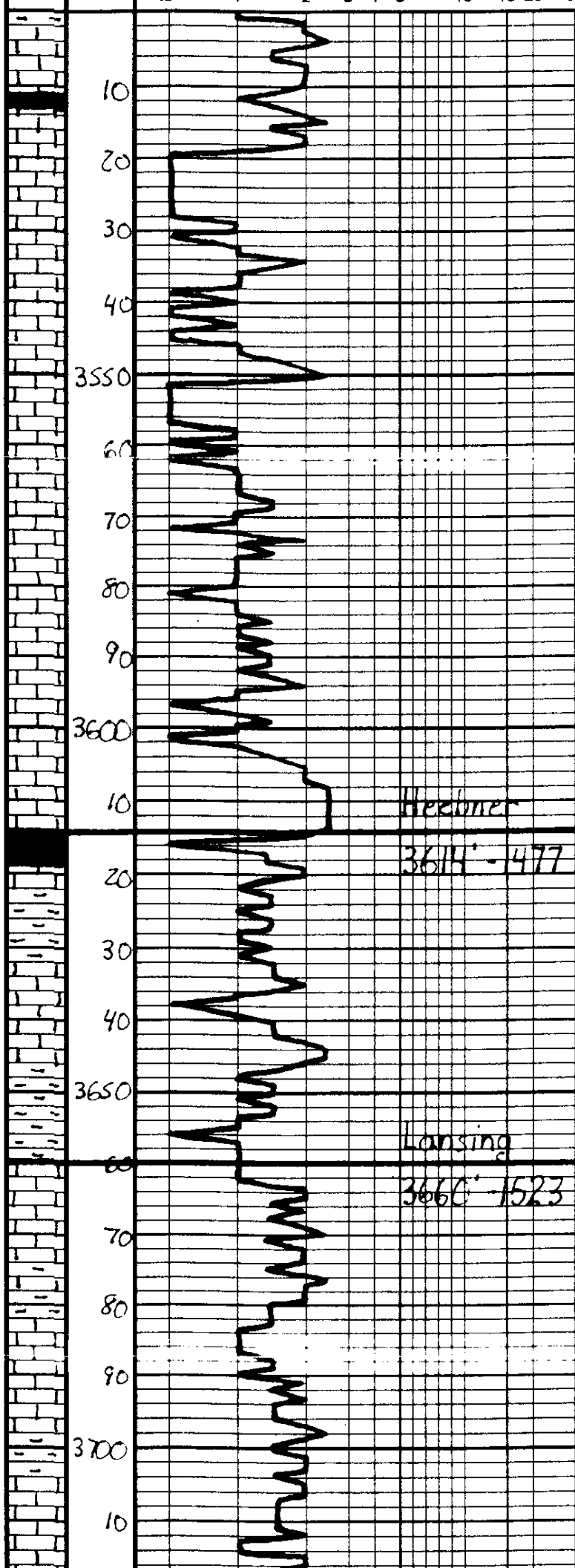
LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.
 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: *9-28-10* TIME SIGNED: _____
 AM PM

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

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

SWIFT OPERATOR: _____ APPROVAL: _____
 CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES
 Thank You!



Sh - Dk Gray - Bk

Ls - Tan. Gray. Mottled. Fx. lar. Fossil, Chalky, Barren

Ls - ala

Ls - Tan. Gray. Mottled. Fx. lar. Fossil, Chalky

Ls - ala

Ls - ala

Ls - Tan. Gray. Mottled. Subela. DKS

Sh - Bk, Calc., Fissile

Sh - Gray. Ben. Gen

Ls - Off wh. Tan. Fx. lar. w/ Fair interx. & Barren

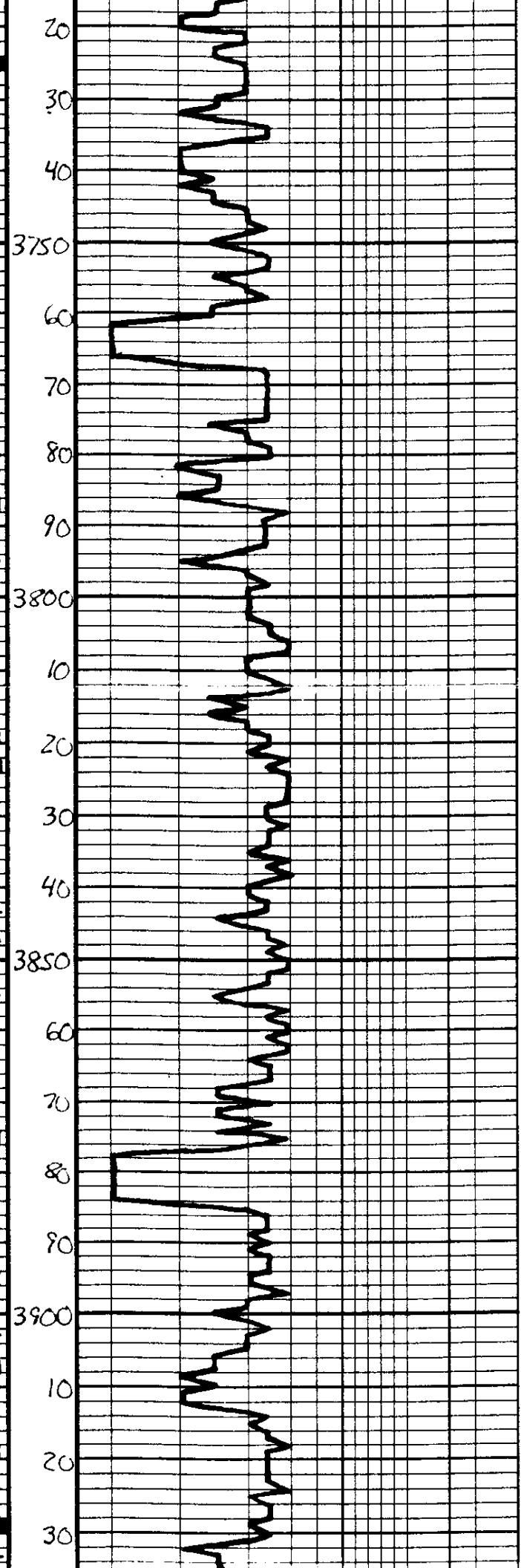
Sh - Gray. Ben. Gen

Ls - Tan. Gray. Fx. lar. Cal. w/ fair int. & Barren

Sh - Gray. Ben

Ls - Off wh. Tan. Fx. lar. w/ Fair int. & Barren

Geo on Location
12:00 p.m. 9-24-2010



LS - ala

Sh - Ddk Gray - Blk

LS - Tan - grey, Faxia w/ pure
interbedded d. Barren

LS - Tan - Lt. grey - Substr. DNS

LS - Off white - Lt. grey, Faxia,
Col. w/ coarse sand d. Barren

LS - ala w/ poor Col. d.

LS - Tan - Lt. grey - Substr.
DNS

LS - ala

Sh - Ddk grey

LS - Tan - Lt. grey - Substr. DNS
d. Tan - grey

Sh - Ddk grey - grey - Ben

LS - Lt. grey - Substr. DNS
d. Tan - grey

LS - ala

Sh - grey - Ben

LS - Off white - Lt. grey, Faxia,
Col. w/ coarse sand d. Barren,
St. d. w/ Tan

LS - ala, DNS

Sh - grey - Ben

LS - Tan - Off white, Faxia,
Col. w/ coarse sand d. interbedded d.
Barren

LS - Tan, Substr. DNS

Sh - Blk - Ddk grey

Ls. Tan. Lt. Gray. Fr. Substr.
DNS, S. Col. S. Tan. Gr.

Sh. Blk. Carb.

Ls. Tan. Gray. S. Mottled
Substr. DNS

Sh. Gray. Bea.

Ls. Tan. Gray. Substr. DNS

Sh. Gray. Bea. Gen

Ls. Tan. Lt. Gray. Substr.
DNS

Ls. Off. Tan. Substr.
DNS, S. Whit. Tan

Ls. a/a, S. Whit. Gray

Sh. Whit. Gray. Bea. Gen

Ls. Off. Tan. Lt. Gray. Substr.
DNS, S. Whit. Gray. Gr.

Ls. Tan. Lt. Gray. Fr.

Sh. Whit. Gray. Gen

Ls. Tan. Lt. Gray. Fr. Substr.
Mottled, DNS

Ls. a/a

Ls. a/a

Ls. Tan. Gray. Substr. DNS

Ls. Gray. Mottled. Substr.
Sh. Gray

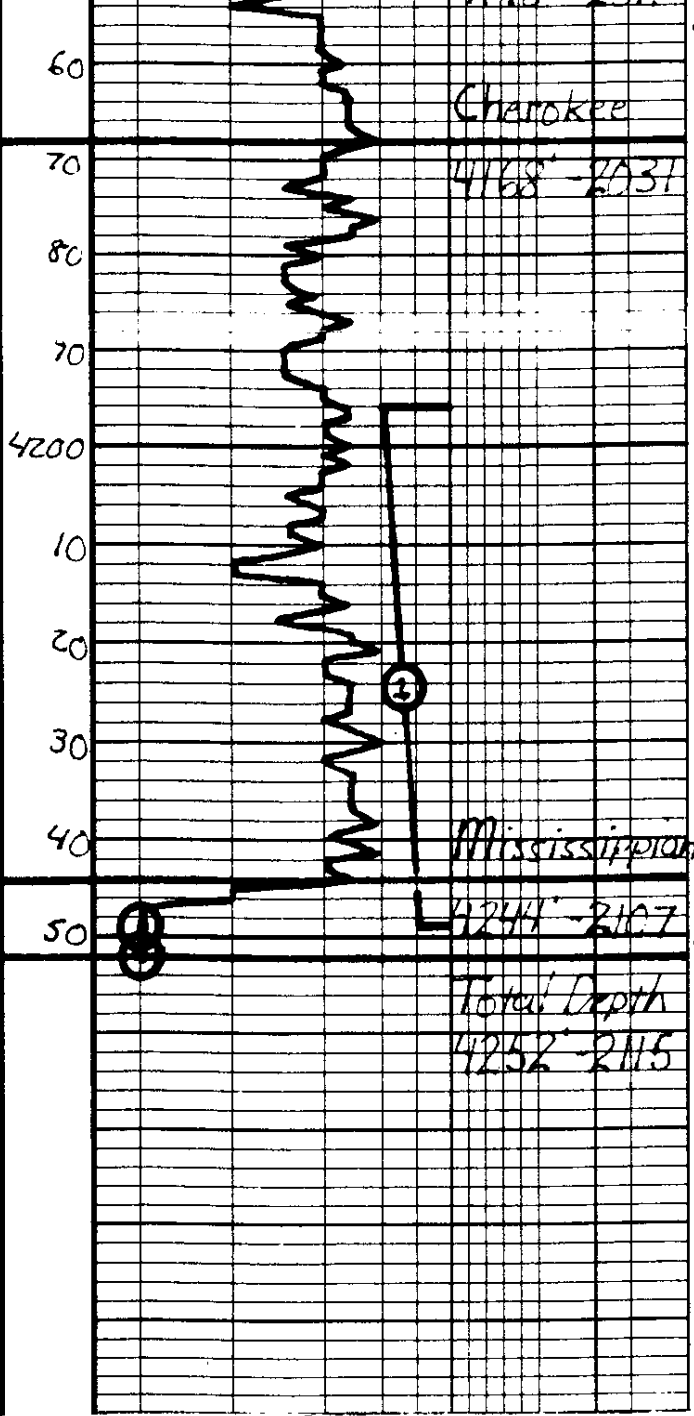
16. Sh. Blk. Carb.

40
3950
60
70
80
90
4000
10
20
30
40
4050
60
70
80
90
4100
10
20
30
40
4150

BIK
3986' - 819

Prudce
4025' - 1931

Fort Scott
4148' - 2111



10
 Ls - Tan - Oolite, Fa - Sulca
 w/ sect. pebbles later
 to 15' sect. in 15' to 20' NSE
 No Galat. Fair Vel. Fluor.

Sh - Red Gray - Blue

Sh - Gray - Blue - Green

Ls - Tan - Gray - Blue - Green - Blue

Ls - a/s

Sh - Gray - Blue - Green

Sh - Multicolored, S. Sh. -
 Whit. Clay

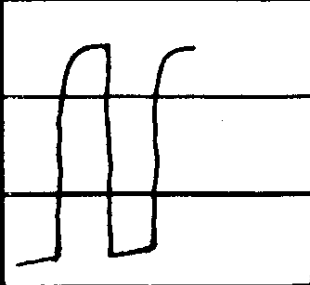
Sh - a/s. Few Random Green
 Gal.

140
 Oolite - AV - Whit - Blue - Fa - Mech.
 Succinea, etc. in Fair - Good
 Crinoids, etc. in Fair - Good
 Heterolites, etc. in Fair - Good
 2' layer oil SP w/ gravel to top
 of Strong S. Fa, Green Oolite, B.C.
 calc. Fluor.

DST #1

4196' - 4249'
 Mississippian
 30" - 30" - 30" - 30"

IH 2071#
 IF 27:57# 24 min.
 ISI 1259#
 Dead
 FF 59:98#
 130B 25 min.
 FSI 1249#
 Dead
 FH 1983#
 BHT 116°F
 Recovery:
 45' GIP
 195' GHOX M
 40% Oil



Respectfully,
 Jason H.
 9-28-2000

Geological Report

American Warrior, Inc.

DSCOB Unit #1

810' FSL & 650' FWL

Sec. 31 T18s R21w

Ness County, Kansas



American Warrior, Inc.

General Data

Well Data: American Warrior, Inc.
DSCOB Unit #1
810' FSL & 650' FWL
Sec. 31 T18s R21w
Ness County, Kansas
API # 15-135-25148-0000

Drilling Contractor: Discovery Drilling Co., Inc. Rig #3

Geologist: Jason Alm

Spud Date: September 19, 2010

Completion Date: September 26, 2010

Elevation: 2129' Ground Level
2137' Kelly Bushing

Directions: Bazine KS, intersection of DD rd. and Hwy 96, 7/8
mi. South, East into location.

Casing: 1400' 8 5/8" surface casing
4251' 5 1/2" production casing

Samples: 10' wet and dry, 3500' to RTD

Drilling Time: 3500' to RTD

Electric Logs: None

Drillstem Tests: One, Trilobite Testing, Inc. "Jason McLemore"

Problems: Bit Trip during drilling of surface hole.

Remarks: None

Formation Tops

	American Warrior, Inc. DSCOB Unit #1 Sec. 31 T18s R21w 810' FSL & 650' FWL
Formation	
Anhydrite	1384', +753
Base	1419', +718
Heebner	3614', -1477
Lansing	3660', -1523
BKc	3986', -1849
Pawnee	4068', -1931
Fort Scott	4148', -2011
Cherokee	4168', -2031
Mississippian	4244', -2107
RTD	4252', -2115

Sample Zone Descriptions

- Fort Scott (4148', -2011): Not Tested**
 Ls – Fine to sub crystalline with scattered pinpoint inter-crystalline, light oil scattered oil stain in porosity, no show of free oil, no odor, fair yellow fluorescents, 10 units hotwire.
- Mississippian Osage (4244', -2107): Covered in DST #1**
 Dolo – Δ – Fine to medium sucrosic crystalline with fair to good inter-crystalline and vuggy porosity, heavy chert, triptolic, heavily weathered with good vuggy porosity, good oil stain with good to heavy oil saturation, strong show of free oil, good odor, bright yellow fluorescents and strong cut fluorescents, 140 units hotwire.

Drill Stem Tests
Trilobite Testing, Inc.
"Jason McLemore"

DST #1

Mississippian Osage

Interval (4196' – 4249') Anchor Length 53'

IHP	– 2071 #	
IFP	– 30" – B.O.B. 24 min.	20-57 #
ISI	– 30" – Dead	1259 #
FFP	– 30" – B.O.B. 25 min.	58-98 #
FSI	– 30" – Dead	1249 #
FHP	– 1983 #	
BHT	– 116°F	

Recovery: 45' GIP
 195' GHOCM 40% Oil, 10% Gas

Structural Comparison

Formation	American Warrior, Inc. DSCOB Unit #1 Sec. 31 T18s R21w 810' FSL & 650' FWL	American Warrior, Inc. V. Strecker #2-31 Sec. 31 T18s R21w 100' FSL & 460' FWL	American Warrior, Inc. Stieben #2-36 Sec. 36 T18s R22w 335' FSL & 335' FEL
Anhydrite	1384', +753	1382', +752	1382', +755
Base	1419', +718	NA	1412', +725
Heebner	3614', -1477	3610', -1476	3611', -1474
Lansing	3660', -1523	3654', -1520	3655', -1518
BKc	3986', -1849	NA	3982', -1845
Pawnee	4068', -1931	4058', -1924	4061', -1924
Fort Scott	4148', -2011	4140', -2006	4140', -2003
Cherokee	4168', -2031	4160', -2026	4161', -2024
Mississippian	4244', -2107	4244', -2110	4236', -2099

Summary

The location for the DSCOB Unit #1 was found via 3-D seismic survey. The new well ran structurally as expected via the survey. One drill stem test was conducted which recovered commercial amounts of oil from the Mississippian Osage Formation. After all gathered data had been examined the decision was made to run 5 1/2 inch production casing to further evaluate the DSCOB Unit #1 well.

Recommended Perforations

Primary:

Mississippian Osage	(4244' – 4249')	DST #1
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Before Abandonment:

Fort Scott:	(4150' – 4156')	Not Tested
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Respectfully Submitted,

Jason Alm
Hard Rock Consulting, Inc.



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

American Warrior Inc
 PO Box 399
 Garden City, KS. 67846
 ATTN: Jason Alm

DSCOB Unit #1
31-18s-21w-Ness
 Job Ticket: 39009 **DST#: 1**
 Test Start: 2010.09.25 @ 12:59:08

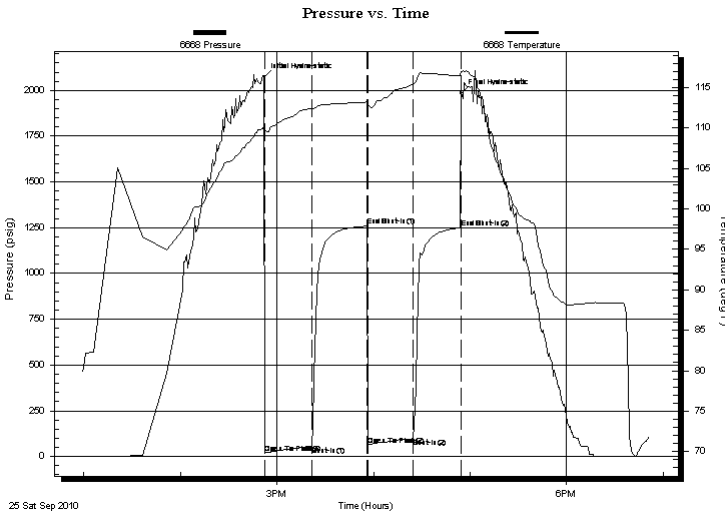
GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 14:52:23
 Time Test Ended: 18:51:38
 Interval: **4196.00 ft (KB) To 4249.00 ft (KB) (TVD)**
 Total Depth: 4249.00 ft (KB) (TVD)
 Hole Diameter: 7.80 inches Hole Condition: Good
 Test Type: Conventional Bottom Hole
 Tester: Jason McLemore
 Unit No: 32
 Reference Elevations: 2137.00 ft (KB)
 2129.00 ft (CF)
 KB to GR/CF: 8.00 ft

Serial #: 6668 Inside
 Press @ Run Depth: 97.89 psig @ 4232.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2010.09.25 End Date: 2010.09.25 Last Calib.: 2010.09.25
 Start Time: 12:59:10 End Time: 18:51:38 Time On Btm: 2010.09.25 @ 14:51:53
 Time Off Btm: 2010.09.25 @ 16:54:23

TEST COMMENT: IFP-Good Blow ,BOB in 24 Min.
 ISI-Dead
 FFP-Good Blow ,BOB in 25 Min.
 FSI-Dead

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2071.41	110.33	Initial Hydro-static
1	20.07	109.50	Open To Flow (1)
30	57.41	112.33	Shut-In(1)
65	1259.14	113.19	End Shut-In(1)
65	58.91	112.79	Open To Flow (2)
93	97.89	115.46	Shut-In(2)
123	1249.48	116.42	End Shut-In(2)
123	1983.17	116.95	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
195.00	Gassy HOCM	2.74
0.00	45' Gas In Pipe	0.00

Gas Rates

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

American Warrior Inc
PO Box 399
Garden City, KS. 67846
ATTN: Jason Alm

DSCOB Unit #1
31-18s-21w-Ness
Job Ticket: 39009 **DST#: 1**
Test Start: 2010.09.25 @ 12:59:08

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 58.00 sec/qt	Cushion Volume: bbl		
Water Loss: 8.79 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 4900.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
195.00	Gassy HOCM	2.735
0.00	45' Gas In Pipe	0.000

Total Length: 195.00 ft Total Volume: 2.735 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:

