_Ind_

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # ...AD58.................
Name ..American. Warrior. Inc.......
Address .P.O. Box. 399.................
........................................
City/State/Zip Garden City. Kans. 67846

Purchaser........................................
........................................

Operator Contact Person ..Joan ..Paluga.....
Phone .316-275-9231..

Contractor:License # ...9087.....................
Name ..Western Kansas Drilling....
R & C Drilling Hays Kans.
Wellsite Geologist..Joan. Paluga
Phone...303-697-1192..

Designate Type of Completion
  X New Well     ___ Re-Entry     ___ Workover

  ___ Oil       ___ SWD          ___ Temp Abd
  ___ Gas       ___ Inj          ___ Delayed Comp.
  X Dry         ___ Other (Core, Water Supply etc.)
If OWWO: old well info as follows:
    Operator ..............................
    Well Name ..............................
    Comp. Date ..............Old Total Depth.....

WELL HISTORY

Drilling Method:
        X Mud Rotary  ___ Air Rotary  ___ Cable

...1-2-86...    ...1-10-86...    ..1-10-86..
Spud Date       Date Reached TD  Completion Date

...4670...      ..............
Total Depth     PBTD

Amount of Surface Pipe Set and Cemented at..328.feet
Multiple Stage Cementing Collar Used?  ___ Yes X No
    If yes, show depth set....................feet
If alternate 2 completion, cement circulated
from...........feet depth to.........w/......SX cmt
Cement Company Name .Halliburton. Services
Invoice # .......................................

API NO. 15-.193-20-388...................
County...Thomas...........................

SW. NW. NE. Sec.30. Twp.10S.Rge.32.. ☐East ☒West

..4290...Ft North from Southeast Corner of Section
..2310...Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name.....Close............Well #. #1...

Field Name.N/A.............................

Producing Formation.......................

Elevation: Ground....3091.'....KB. 3096

### Section Plat



WATER SUPPLY INFORMATION
Disposition of Produced Water:     ___ Disposal
Docket #.....................      ___ Repressuring

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717
Source of Water:
Division of Water Resources Permit #...............

X Groundwater.4290.Ft North from Southeast Corner
(Well)    ..2690.Ft West from Southeast Corner of
          Sec 30 Twp 10 Rge 32 ___ East X West

___ Surface Water......Ft North from Southeast Corner
(Stream,pond etc)......Ft West from Southeast Corner
          Sec     Twp     Rge    ___ East   ___ West

X Other (explain)............................
          (purchased from city, R.W.D. #)
Drilled Water Well on lease

MAR 03 1986
Geological Survey
WICHITA BRANCH

INSTRUCTIONS:  This form shall be completed in duplicate and filed with the Kansas Corporation Commission,
200 Colorado Derby Building, Wichita, Kansas  67202, within 90 days after completion or recompletion of any
well. Rule 82-3-130 and 82-3-107 apply.
Information on 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 drillers time log shall be attached with this form. 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

SIDE TWO

Operator Name ...American Warrior Inc... Lease Name.......Close........Well #...2x..

Sec..30.... Twp..10.S.. Rge...32.... ☐ East ☒ West    County....Thomas.................

## WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken ☒ Yes ☐ No
Samples Sent to Geological Survey ☐ Yes ☐ No
Cores Taken ☐ Yes ☐ No

DST #1    4075 - 4108    Rec 130' Witry Mud

| | | |
|---|---|---|
| ISIP | 1202 | 45 |
| IFP | 52·66 | 45 |
| FSIP | 1186 | 45 |
| FFP | 70 86 | 45 |

DST #2   4190 - 4221    Rec 45' Dlg mud

| | | |
|---|---|---|
| ISIP | 296 | 45 |
| IFP | 43 43 | 45 |
| FSIP | 84 | 45 |
| FFP | 45 45 | 45 |

**Formation Description**

☒ Log    ☐ Sample

| Name | Top | Bottom |
|---|---|---|
| ANH | 2592 (+504) | |
| TOPEKA | 3778 (-636) | |
| HEEB | 4002 (-906) | |
| TOP | 4024 (-928) | |
| LANS | 4042 (-946) | |
| MUNCIE CREEK | 4174 (-1078) | |
| STARK Shale | 4259 (-1163) | |
| B/KC | 4323 (-1227) | |
| MARM | 4356 (-1260) | |
| PAWNEE LS | 4454 (-1358) | |
| FT SCOTT LS | 4514 (-1418) | |
| CHEROKEE Sh | 4544 (-1448) | |
| Johnson Zone | 4578 (-1482) | |
| Miss | 4644 (-1548) | |

### 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 | 21 | 378 | comm | 225 | 2% Cac |
| | | | | | | | |
| | | | | | | | |

| PERFORATION RECORD | | Acid, Fracture, Shot, Cement Squeeze Record | |
|---|---|---|---|
| Shots Per Foot | Specify Footage of Each Interval Perforated | (Amount and Kind of Material Used) | Depth |
| | | | |
| | | | |
| | | | |
| | | | |

| TUBING RECORD | Size | Set At | Packer at | Liner Run ☐ Yes ☐ No |
|---|---|---|---|---|

| Date of First Production | Producing Method |
|---|---|
| | ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (explain)............ |