

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 31548
Name: AMERICAN WARRIOR, INC.
Address: P.O. Box 399
City/State/Zip: Garden City, KS 67846
Purchaser: NONE
Operator Contact Person: Cecil O'Brate
Phone: (620) 275-9231
Contractor: Name: Discovery Drilling Co., Inc.
License: 31548
Wellsite Geologist: Ron Nelson

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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. _____

10/29/02 11/3/02 11/4/02
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 185-23,168-0000
County: Stafford
30' S & 80' W of
C E 72 SW SW Sec. 34 Twp. 21 S. R. 14W East West
2010 feet from / (circle one) Line of Section
910 feet from / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Gates Well #: 1-34
Field Name: Curtis
Producing Formation: None
Elevation: Ground: 1941 Kelly Bushing: 1949
Total Depth: 3849 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 366.32 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate If completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 26,000 ppm Fluid volume 240 bbls
Dewatering method used Haul Free Fluids
Location of fluid disposal if hauled offsite:
Operator Name: Gee Oil Service
Lease Name: Rodgers SWD License No.: 32482
Quarter NW/4 Sec. 34 Twp. 23 S. R. 13W East West
County: Stafford Docket No.: D-23350

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: [Signature]
Title: Compliance Corr. Date: 6-5-2003
Subscribed and sworn to before me this 6th day of June, 2003
Notary Public: [Signature]

Date Commission Expires: _____
NOTARY PUBLIC State of Kansas
MARY L. WATTS

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

Operator Name: AMERICAN WARRIOR, C. Lease Name: Gates Well #: 1-34
 Sec. 34 Twp. 21 S. R. 14W East West County: Stafford

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.

<p>Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i></p> <p>List All E. Logs Run: _____</p> <p>Dual.IND, Dens.Neut., Sonic</p>	<table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Topeka</td> <td>3024</td> <td>- 1075</td> </tr> <tr> <td>Heebner</td> <td>3310</td> <td>- 1361</td> </tr> <tr> <td>Toronto</td> <td>3334</td> <td>- 1385</td> </tr> <tr> <td>Douglas</td> <td>3349</td> <td>- 1399</td> </tr> <tr> <td>LKC</td> <td>3438</td> <td>- 1489</td> </tr> <tr> <td>BKC</td> <td>3662</td> <td>- 1713</td> </tr> <tr> <td>Viola</td> <td>3716</td> <td>- 1767</td> </tr> <tr> <td>Simpson</td> <td>3774</td> <td>- 1827</td> </tr> <tr> <td>Arbuckle</td> <td>3832</td> <td>- 1883</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Topeka	3024	- 1075	Heebner	3310	- 1361	Toronto	3334	- 1385	Douglas	3349	- 1399	LKC	3438	- 1489	BKC	3662	- 1713	Viola	3716	- 1767	Simpson	3774	- 1827	Arbuckle	3832	- 1883
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CASING RECORD <input checked="" 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
Surface Pipe	12½	8 5/8	23	366.32	Common	260	2%Gel&3%CC

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input 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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
NONE	D/A.		

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
		NONE				
Date of First, Resumed 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
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	