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KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISIONForm ACO-1  
September 1999  
Form Must Be TypedWELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4058  
 Name: American Warrior inc  
 Address: P.O. Box 399,  
 City/State/Zip: Garden City, Ks 67846  
 Purchaser: None / D/A  
 Operator Contact Person: Kevin Wiles Sr  
 Phone: (620) 275-2963  
 Contractor: Name: Duke Drlg.  
 License: 5929  
 Wellsite Geologist: Alan Downing

## Designate Type of Completion:

☒ New Well ☐ Re-Entry ☐ Workover  
☐ Oil ☐ SWD ☐ SIOW ☐ 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. \_\_\_\_\_

8-13-01 8-25-01 8-25-01  
 Spud Date or Date Reached TD Completion Date or  
 Recompletion Date Recompletion Date

API No. 15 033-21,253-0000  
 County: Comanche  
110' S & 20' S of  
E SW SW Sec. 31 Twp. 31 S R. 18 W East ☐ West ☒  
640' feet from S / N (circle one) Line of Section  
770' feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SWLease Name: Brass Well #: 1-31Field Name: Cold waterProducing Formation: NoneElevation: Ground: 2092 Kelly Bushing: 21-5Total Depth: 5722' Plug Back Total Depth: NAAmount of Surface Pipe Set and Cemented at 642 FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from \_\_\_\_\_

feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx qmt.

## Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 16,000 ppm Fluid volume 320 bblsDewatering method used Hauled Offsite

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: KBW Oil & GasLease Name: Harmon SWD License No.: 5993Quarter NW Sec. 11 Twp. 33 S S. R. 20 W East ☐ West ☒County: Comanche Docket No.: 98329

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: \_\_\_\_\_

Title: Production Supt. Date: 5-10-2002Subscribed and sworn to before me this 10th day of May19 2002

Notary Public: \_\_\_\_\_

Date Commission Expires: 11/1/03

DEBRA J. PURCELL  
 Notary Public - State of Kansas  
 My Appt. Expires 11/1/03

## KCC Office Use ONLY

Letter of Confidentiality Attached  
 If Denied, Yes ☒ Date: 5-17-02 Dpw  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

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KOC WICHITA

Side Two

Operator Name: American Warrior inc Lease Name: Brass Well #: 1-31  
Sec. 31 Twp. 31 S. R. 18 W. ☐ East ☒ West County: Comanche

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.

Drill Stem Tests Taken ☒ Yes ☐ No  
(Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No  
(Submit Copy)

List All E. Logs Run:

CDNL/GR. Micro. Sonic.  
Dual IND

☒ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
Heebner	4270'	-2165
Lansing	4438'	-2333
Swope	4761'	-2656
Marmaton	4918'	-2722
Pawnee	5005'	-2900
Fort Scott	5045'	-2940
Cherokee	5054'	-2949
Miss	5122'	-3017
Viola	5662'	-3557

#### 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	# Sacjs Used	Type and Percent Additives
Surface	12 1/4"	8-5/8"	23#	642	Stand.	325	3%cc 2%gal

#### 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
	None	D/A		<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumerd 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 ☐ Vented ☐ Sold ☐ Used on Lease (If vented, Sumit ACO-18.) METHOD OF COMPLETION ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled ☐ Other (Specify) \_\_\_\_\_ Production Interval \_\_\_\_\_