



# COPY KCC

*Joe*

## CONFIDENTIAL

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

AUG 01 2001

Form ACO-1  
September 1999  
Form Must Be Typed

## CONFIDENTIAL

Operator: License # 4058  
Name: AMERICAN WARRIOR INC.  
Address: PO BOX 399,  
City/State/Zip: GARDEN CITY, KS., 67844  
Purchaser: ANR  
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-parf. ☐ Conv. to Enhr./SWD  
☐ Plug Back 5180' Plug Back Total Depth \_\_\_\_\_  
☐ Commingled Docket No. \_\_\_\_\_  
☐ Dual Completion Docket No. \_\_\_\_\_  
☐ Other (SWD or Enhr.?) Docket No. \_\_\_\_\_  
5-26-01 6-4-01 6-20-01  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 033-21,226-0000  
County: COMANCHE  
C S/4 N/4 NW Sec. 26 Twp. 31S S. R. 20W ☐ East ☒ West  
1082' feet from S / (N) (circle one) Line of Section  
643' feet from E / (W) (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: RANDALL Well #: 2  
Field Name: WILDCAT  
Producing Formation: MISS  
Elevation: Ground: 1972' Kelly Bushing: 1985'  
Total Depth: 5210' Plug Back Total Depth: 5180'  
Amount of Surface Pipe Set and Cemented at 608' 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 21,000 ppm Fluid volume 400 bbls  
Dewatering method used EVAPORATION  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
Quarter: \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West  
County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

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: PRODUCTION SUPT. Date: 7-26-2001  
Subscribed and sworn to before me this 26th day of July  
19 2001  
Notary Public: [Signature]  
Date Commission Expires: 11/4/03

**DEBRA J. PURCELL**  
Notary Public - State of Kansas  
My Appt. Expires 11/4/03

KCC Office Use ONLY	
<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
_____	If Denied, Yes <input type="checkbox"/> Date: _____
_____	Wireline Log Received
_____	Geologist Report Received
_____	UIC Distribution

*Please*

MAY 05 2001

From  
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COPY

Operator Name: AMERICAN WARRIOR INC. Lease Name: RANDALL Well #: 2  
 Sec. 26 Twp. 31S S. R. 20W ☐ 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: CDN, SONIC, MICRO DUAL IND.

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

Name	Top	Datum
HEEBNER	4097'	-2113
LKC	4283'	-2289
DRUM	4498'	-2514'
SWOPE	4635'	-2659
MARMATON	4779'	-2799
SCOTT	4886'	-2901
MISS.	5006'	-3021

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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	12-1/4"	8-5/8"	23#	608	65/35POZ	410	2%GEL, 3%CC
PRODUCTION	7-7/8"	5-1/2"	15.5#			125	1/4#FLOCELE, D-AIR

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" 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
2	5006'-5028'	NONE	608

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	5000'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method			
SI		<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. SI	Gas SI	Mcf	Water Bbls.	Gas-Oil Ratio

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	NA
	<input type="checkbox"/> Other (Specify)	

Release  
 MAY 05 2001  
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