

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Farm ACO-1  
September 1998  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4058  
Name: AMERICAN WARRIOR INC.  
Address: PO. BOX 399,  
GARDEN CITY, KS., 67848  
Purchaser: ONEK  
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. Ass.  
 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 5408'  Plug Back Total Depth \_\_\_\_\_  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?)  Docket No. \_\_\_\_\_

<u>11-14-2000</u>	<u>11-27-2000</u>	<u>1-22-2001</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 033-21,168-0000  
County: COMANCHE 140N&140E  
W. W. Sec. 29 Twp. 32S S. R. 18V  East  West  
2500' feet from (1) (1) (circle one) Line of Section  
800' feet from (1) (1) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: BUNNELL Well #: 2  
Field Name: WILDCAT

Producing Formation: MISS  
Elevation: Ground: 2146' Kelly Bushing: 2158  
Total Depth: 5450' Plug Back Total Depth: 5408'  
Amount of Surface Pipe Set and Cemented at 602' 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/ \_\_\_\_\_ ex cmt.

Drilling Fluid Management Plan AZT 1 DW 7-19-01  
(Data must be collected from the Reserve Pit)  
Chloride content 16,000 ppm Fluid volume 300 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.: \_\_\_\_\_

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CONSERVATION DIVISION  
MAY 1 2001

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: Cecil O'Quinn  
Title: PRESIDENT Date: 5-9-2001  
Subscribed and sworn to before me this 14th day of May  
2001  
Notary Public: Debra Purcell  
Date Commission Expires: 11/4/03

KCC Office Use ONLY  
 Letter of Confidentiality Attached  
 If Denied, Yes  Date: 5-21-01 DW  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
 IOG

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

*md*

X

Operator Name: AMERICAN WARRIOR INC. Lease Name: BUNNELL Well #: 2  
 Sec. 29 Twp. 32S S. R. 18W  East  West County: COMANCHE 140°N&140°E

**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: MICRO, SONIC, CDNL/GR, DI.

Name	Top	Datum
HEEBNER	4387'	-2229
LANSING	4573'	-2415
DRUM	4800'	-2642
BKC	5048'	-2890
MARMATON	5080'	-2901
PAWNEE	5147'	-2986'
FORT SCOTT	5182'	-3023
MISS	5250'	-3095

CASING RECORD <input type="checkbox"/> New <input checked="" 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"	28#	602'	CLASS "A"	300	8%GEL,3%CC
PRODUCTION	7-7/8"	5-1/2"	15.5#	5442'		100	1/4#FLOCELE, 2%GASTOP
Conductor	17 1/2"	13 3/8"		325	CLASS A	550	2.25 5% GEL / 5% PCC 4.50 5% CLASS A

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				

PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated				KANSAS CORPORATION COMMISSION Well Perforation, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	
Shots Per Foot				Amount	Depth
2	5302'-5308', 5268'-5272',			2000 GALS 20% FE ACID	602'
					5442'

TUBING RECORD							
Size	Set At	Packer At	Liner Run				
2-3/8"	5400'			<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Date of First, Resumed Production, SWD or Entr.	Producing Method						
SI	<input type="checkbox"/> Flowing <input checked="" 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		
		X					
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 ACD-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dualty Comp. <input type="checkbox"/> Commingled NA		<input type="checkbox"/> Other (Specify) _____				

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MAY 17 2001