



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4058  
Name: AMERICAN WARRIOR INC.  
Address: PO. BOX 399,  
City/State/Zip: GARDEN CITY, KS., 67846  
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-perf. ☐ Conv. to Enhr./SWD  
☐ Plug Back 5800' ☐ Plug Back Total Depth  
☐ Commingled ☐ Docket No. \_\_\_\_\_  
☐ Dual Completion ☐ Docket No. \_\_\_\_\_  
☐ Other (SWD or Enhr.?) ☐ Docket No. \_\_\_\_\_

12-15-2000 12-31-2000 2-13-2001  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 033-21,173-0000  
County: COMANCHE 95°28'40"W OF  
C E/ E/ SW Sec. 14 Twp. 32S S. R. 19W ☐ East ☒ West  
1225' feet from S/ N (circle one) Line of Section  
2270' feet from E/ W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW ☒ SW  
Lease Name: LAKE Well #: 2  
Field Name: LAKE  
Producing Formation: MISS  
Elevation: Ground: 2041' Kelly Bushing: 2054'  
Total Depth: 5946' Plug Back Total Depth: 5800'  
Amount of Surface Pipe Set and Cemented at 665' 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 ACT 1 DAW 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.: \_\_\_\_\_

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 D. Butte  
Title: PRESIDENT Date: 5-9-2001  
Subscribed and sworn to before me this 14th day of May 19-2001  
Notary Public: Debra J. Purcell  
Date Commission Expires: 11/4/03

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

KCC Office Use ONLY

☐ Letter of Confidentiality Attached  
☒ If Denied, Yes ☒ Date: 5-30-01 DAW  
☒ Wireline Log Received  
☒ Geologist Report Received  
☐ UIC Distribution  
☒ IOG

