



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

Form ACO-1  
September 1998  
Form Must Be Typed

**ORIGINAL**

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: (820) 275-2963  
Contractor Name: DUKE DRLG.  
License: 5929

Wellsite Geologist: ALAN DOWNING  
Designate Type of Completion: RECEIVED  
STATE CORPORATION COMMISSION  
WICHITA, KANSAS  
May 30 2001

☒ 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 5515' ☐ Plug Back Total Depth  
☐ Commingled ☐ Docket No. \_\_\_\_\_  
☐ Dual Completion ☐ Docket No. \_\_\_\_\_  
☐ Other (SWD or Enhr.?) ☐ Docket No. \_\_\_\_\_

1-16-2001 1-31-2001 2-19-2001  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 033-21,181-0000  
County: COMANCHE  
NE SE Sec. 14 Twp. 32S S. R. 19W ☐ East ☐ West  
2080' feet from (S) N (circle one) Line of Section  
600' 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 #: 3

Field Name: UNNAMED

Producing Formation: MISS

Elevation: Ground: 2013' Kelly Bushing: 2026'

Total Depth: 5900' Plug Back Total Depth: 5515'

Amount of Surface Pipe Set and Cemented at 617' 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 AST 8/29/01 JB  
(Date must be collected from the Reserve Pit)

Chloride content 18,000 ppm Fluid volume 650 bbls

Dewatering method used HAULED OFF-SITE

Location of fluid disposal if hauled offsite:

Operator Name: AMERICAN WARRIOR INC.

Lease Name: LAKE #2 License No. 4058

Quarter SW Sec. 14 Twp. 32S S. R. 19W ☐ East ☐ West

County: COMANCHE Docket No. NA

**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: 5-23-2001

Subscribed and sworn to before me this 25th day of May

to 2001

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

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: 6-29-01 Dppw  
☒ Wireline Log Received  
☒ Geologist Report Received  
☐ UIC Distribution

IOG

Operator Name: AMERICAN WARRIOR INC. Lease Name: LAKE Well #: 3  
 Sec. 14 Twp. 32S S. R. 19W ☐ 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: CDR, DI, CAL, SCINC

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

Name	Top	Datum
HEEBNER	4274'	-2247
LANSING	4484'	-2436
DRUM	4685'	-2636
BKC	4917'	-2886
MARMATON	4922'	-2894
PAWNEE	5010'	-2982
FORT SCOTT	5048'	-3020
MISS	5116'	-3088
WOLA	5800'	-3769

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"	283	617'	CLASS "A"	310	3%CC, 2%GEL
PRODUCTION	7-7/8"	5-1/2"	17#	5530'		160	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	5166'-5172', 5176'-5182'	2500 GALS 20% FE ACID	617'
			5530'

TUBING RECORD									
Size	Set At	Packer At	Liner Run						
2-3/8"	5450'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Date of First, Resumed Production, SWD or Enhr.		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			SI			
Disposition of Gas									
METHOD OF COMPLETION									
Production Interval									
<input type="checkbox"/> Ventd <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)									