



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1998
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 4058
Name: AMERICAN WARRIOR INC.
Address: PO BOX 399,
City/State/Zip: GARDEN CITY, KS., 67848
Purchaser: ANR

Operator Contact Person: KEVIN WILES
Phone: (620) 275-2963
Contractor: Name: DUKE DRG.

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 5376' ☐ Plug Back Total Depth
☐ Conmingled ☐ Docket No. _____
☐ Dual Completion ☐ Docket No. _____
☐ Other (SWD or Enhr.?) ☐ Docket No. _____

10-20-2000 10-28-2000 11-9-2000
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 033-21,152-0000
County: COMANCHE 45°N&21°W OF
C SE NV Sec. 33 Twp. 32S S. R. 19W ☐ East ☐ West
1935' feet from S (N) (circle one) Line of Section
1959' feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: KERSTETTER Well #: 3-33

Field Name: UN-NAMED
Producing Formation: MISS

Elevation: Ground: 1909' Kelly Bushing: 1922'

Total Depth: 5400' Plug Back Total Depth: 5376'

Amount of Surface Pipe Set and Cemented at 818' 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 ALT 1 8/30/01 JB
(Data must be collected from the Reserve Pit)

Chloride content 16,000 ppm Fluid volume 500 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: _____

Title: PRODUCTION SUPT. Date: 5-25-2001

Subscribed and sworn to before me this _____ day of _____

Notary Public: _____

Date Commission Expires: 11/4/03

KCC Office Use ONLY

- ☒ Letter of Confidentiality Attached
- ☒ If Denied, Yes ☒ Date: 6-29-01 DAW
- ☒ Wireline Log Received
- ☒ Geologist Report Received
- ☐ UIC Distribution

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

X

Side Two

Operator Name: AMERICAN WARRIOR INC. Lease Name: KERSTETTER Well #: 3-33
 Sec. 33 Twp. 32S S. R. 19W ☐ East ☐ West County: COMANCHE 45°N&21°W OF

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, DL, CAL, SCINC

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

Name	Top	Datum
HEEBNER	4182'	-2258
LANGING	4361'	-2436
DRUM	4583'	-2668
BKC	4858'	-2849'
MARMATON	4870'	-2949
PAWNEE	4955'	-3032
FORT SCOTT	4996'	-3089
MISS	5082'	-3158

CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermedials, 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#	818'	CLASS "A"	325	3%CC, 2%GEL
PRODUCTION	7-7/8"	5-1/2"	15.5#	5399'		150	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	5172'-5178', 5154'-5164', 5136'-5146', 5116'-5126'	1500GALS 20%FE ACID	818'
			5399'

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	5100'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhn.		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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		X	SI		
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)			