

FORM MUST BE TYPED

SIDE ONE

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STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACD-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 4058
Name: American Warrior INC.
Address PO. Box 399
Garden City,
City/State/Zip KS, 67846
Purchaser: ANR
Operator Contact Person: Kevin Wiles Sr.
Phone () 316-275-2963
Contractor: Name: Duke Drilling
License: 5929
Wellsite Geologist: Alan Dowling
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSU, Expl., Cathodic, etc.)

CONSERVATION DIVISION
Wichita, Kansas
MAY 24 2000

If Workover/Re-Entry: old well info as follows:

Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PSTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

1-28-97 2-7-97 2-19-97
Spud Date Date Reached TD Completion Date

API NO. 15- 033-20,9240000
County Comanche
110'S C-E/26ESE Sec. 33 Twp. 32s Rge. 19 ^E_W
550' Feet from S/W (circle one) Line of Section
330' Feet from E/W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE. SE. NW or SW (circle one)
Lease Name Nielson Well # 1-33
Well Name Wildcat
Producing Formation Miss., -FT. Scott, -Pawnee
Production: Ground 1917' KB 1930'
Total Depth 5400' PSTD 5359'
Amount of Surface Pipe Set and Cemented at 650 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 cat.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 48000 ppm Fluid volume 200 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License No. _____
_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W
County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 on 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 5-18-2000
Subscribed and sworn to before me this 22nd day of May
2000
Notary Public [Signature]
Date Commission Expires 11/1/01
Notary Public - State of Kansas
My Appt. Expires _____

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KCS Plug Other
(Specify)

SIDE TWO

Operator Name American Warrior Inc. Lease Name Nielson Well # 1-33
 Sec. 33 Twp. 32s Rge. 19 East County Comanche
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	4173'	-2243
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Toronto	4194'	-2264
List All E. Logs Run:		Lansing	4368'	-2438
		KC A	4708'	-2777
		KC B	4772'	-2842
		Marmaton	4894'	-2985
		Pawnee	4960'	-3030
		Fort Scott	5000'	-3070
		Cherokee	5012'	-3082
		Miss .	5092'	-3162

Dual IND.- Comp/Den/Nuetron
Micro

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"	23#	650'	Halliburton	250	2%cc
Production	7-7/8"	5 1/2"	17#	5398'	Midcon	200	5% cage. halad 322

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives	
<input 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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
2	4976'-4986', 5002'-5006'		10,000 gals. 15%	4976'
2	5168'-5172', 5222'-5228'		FE. acid	
2	5266'-5272'			5272'

TUBING RECORD		Size	Set At	Pecker At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
		2-3/8"	5300'	none				
Date of First, Resumed Production, SWD or Inj.				Producing Method				
March 1997/ 5-1-2000				<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
		12		500		34		

Disposition of Gas:	<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled	Production Interval
		<input type="checkbox"/> Other (Specify) _____		4976'-5272'