

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
200 Colorado Derby Building  
Wichita, Kansas 67202

WELL PLUGGING RECORD  
K.A.R.-82-3-117

API NUMBER 15-025-21260-00-00

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Corp. Div.  
office within 30 days.

LEASE NAME Giles

WELL NUMBER 4-24

100 Ft. from S Section Lin

1900 Ft. from E Section Lin

SEC. 24 TWP. 31 RGE. 22 ~~W~~ (W)

COUNTY Clark County, Kansas

Date Well Completed \_\_\_\_\_

Plugging Commenced \_\_\_\_\_

Plugging Completed 04-30-04

LEASE OPERATOR American Warrior, Inc.

ADDRESS PO Box 399 Garden City, Kansas 67846-0399

PHONE# (620) 275-9231 OPERATORS LICENSE NO. 4058

Character of Well D&A

(Oil, Gas, D&A, SKD, Input, Water Supply Well)

The plugging proposal was approved on 04-30-04 (date)

by Richard Lacey (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, Is well log attached? Yes

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 6376'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out

RECEIVED

JUN 30 2004

Describe in detail the manner in which the well was plugged, indicating where \_\_\_\_\_ placed and the method or methods used in introducing it into the hole. If cement or other pl \_\_\_\_\_ were used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each se

1st Plug: 1200' w/50 sacks cement through drillpipe

2nd Plug: 630' w/50

3rd Plug: 40' w/10 Rathole w/15 Mousehole w/10

Name of Plugging Contractor Duke Drilling Co., Inc. License No. 5929

Address PO Box 823 Great Bend, Kansas 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Warrior, Inc.

STATE OF Kansas COUNTY OF Finney, ss.

Jody L. Smith Foreman

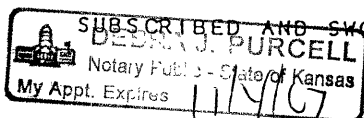
(Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above-described well as filed th the same are true and correct, so help me God.

(Signature) \_\_\_\_\_

(Address) \_\_\_\_\_

P.O. Box 399 Garden City Ks 67846



My Commission Expires: 11/16/07

Notary Public

USE ONLY ONE SIDE OF EACH FORM