STATE OF KANSAS STATE CORPORATION COMMISSION

WELL PLUGGING RECORD API NUMBE**14 095-21886-00-00** K.A.R.-82-3-117 130 South Market, Room 2078 Wichita, Kansas 67202-3802 LEASE NAME Hogg TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div. WELL NUMBER 1-21 1650 Ft. from S Section Line office within 30 days. 2310 Ft. from E Section Line LEASE OPERATOR American Warrior, Inc. SEC. 21 TWP. 30 RGE. 9 XXXXXX(W)ADDRESS PO Box 399 Garden City, Kansas 67846-0399 COUNTY Kingman County, Kansas PHONE#( 620) 275-9231 OPERATORS LICENSE NO. 4058 Date Well Completed Character of Well **D&A** Plugging Commenced 06-19-04 Plugging Completed 06-19-04 (Oil, Gas, D&A, SWD, Input, Water Supply Well) The plugging proposal was approved on 06-18-04by \_\_\_\_\_ **Jack Luthi** (KCC District Agent's Name). Is ACO-1 filed?\_\_\_\_\_ If not, is well log attached?\_\_\_\_\_ Producing Formation \_\_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_ T.D. 4820' Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Pulled Out RECEIVED Formation Content From To Size Put In JUL 0 8 2004 KCC WICHITA Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed from feet to feet each set lst Plug: 4820 w/35 sacks cement through drillpipe — feet to feet each set 1100' w/35 2nd Plug: 3rd Plug: 200' w/50 25' w/25 Rathole w/15 Mousehole w/10 4th Plug: Name of Plugging Contractor <u>Duke Drilling Co., Inc.</u> License No. 5929 Address PO Box 823 Great Bend Kansas 67530 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Warrior, Inc. STATE OF Ks. COUNTY OF Finney above-described well, being first duly sworn on oath, sais: That I have knowledge of the facts, staatements and matters herein contained and the log of the above-described well as filed that the (Employee of Operator) or (Operator) of same are true and correct, so help me God. (Signature) Box 399 Garden City Ks.67846 (Address) Lath day of SUBSCRIBED AND SWORN TO before me this

> NOTARY PUBLIC State of Kansas MARY L. WATTS

My Commission Expire

Form CP-4 Revised 05-88