

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
130 South Market, Room 2078  
Wichita, Kansas 67202-3802

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

API NUMBER 15-033-21412-00-00

LEASE NAME Kerstetter

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

WELL NUMBER 4-33

2040 Ft. from <sup>N</sup> Section Line

1250 Ft. from <sup>W</sup> Section Line

LEASE OPERATOR American Warrior, Inc.

SEC. 33 TWP. 32 RGE. 19 ~~19~~ (W)

ADDRESS P.O. Box 399 Garden City, Kansas 67846-0399

COUNTY Comanche County, Kansas

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

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

Character of Well D&A

Plugging Commenced 11-05-04

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

Plugging Completed 11-06-04

The plugging proposal was approved on \_\_\_\_\_ (date,

by \_\_\_\_\_ (KCC District Agent's Name).

Is ACO-1 filed? \_\_\_\_\_ If not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 5013'

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

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

1st Plug: 850' w/50 sacks cement through drillpipe

2nd Plug: 565' w/50

3rd Plug: 200' w/40

4th 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

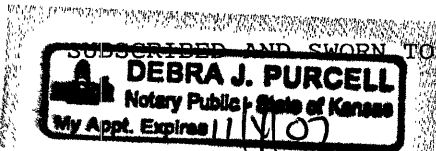
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Warrior, Inc.

STATE OF KS COUNTY OF Finney, ss.

Jody Smith (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) [Signature]

(Address) PO Box 399 Garden City, KS 67846



My Commission Expires: 11/1/07

RECEIVED  
NOV 24 2004  
KCC WICHITA

Form CP-4  
Revised 05-88

[Signature]