For KCC Use: 5 - 24 05 Effective Date: 5 - 24 05 District # 4 SGA? Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

NOTICE OF INTENT TO DRILL

fust be approved by KCC five (5) days prior to commencing well

Form C-1
December 2002
Form must be Typed
Form must be Signed
All blanks must be Filled

Conductor pipe required NGNE feet Minimum surface pipe required 200 feet per Alt. > 2 Approved by: RSP5-19.05 Approved by: RSP5-19.05		Musi de a	pproved by KCC rive	(5) days prior to commencing well	
SW_INV_NEAL Sec. 23 Trpp, 5 S. R. 18 West Mean M	Expected Soud Date May	16	2005	Snot Ap. 150'5 + 90'W of	et
OFERTOR: Licentare 4058 Name. American Warrior, Inc. Address. P.O. Box 399 Address. P.O. Box 399 Address. P.O. Box 399 No. 2002 P.O. Box 399 P.O. Box 3		nonth day	year		
Name, Anerican Warrior, Inc. Address P. Dos 999 Address Comment Section Place W. Line of Section Place Address Imegular Imegular Note: Locate well on the Section Plat on reverse alde) Contact Person. Cecl O'Brate Contact Person. Cecl O'Brate Contact Person. Cecl O'Brate Contact Person. Cecl O'Brate Note: Locate well on the Section Plat on reverse alde) Contact Person. Cecl O'Brate Note: Locate well on the Section Plat on reverse alde) Contact Person. Cecl O'Brate Note: Locate well on the Section Plat on reverse alde) Contact Person. Cecl O'Brate Note: Anthorization Section Plat on reverse alde) Contact Person. Cecl O'Brate Note: Anthorization Section Plat on reverse alde) Contact Person. Cecl O'Brate Note: Anthorization Section Plat on reverse alde) Contact Person. Cecl O'Brate Note: Anthorization Section Plat on reverse alde) Note: Anthorization Plat on reverse alde) Note: Anth	OPERATOR: 1:# 4058		./	· · · · · · · · · · · · · · · · · · ·	
Addresse P.O. Box 399 City/Stant/Pip: Garden City, KS 67846-0399 City/Stant/Pip: Garden City, KS 67846-0399 City/Stant/Pip: Garden City, KS 67846-0399 Contact Peanor. Sect O'Brate Phone: 250-275-9231 CONTRATOR: Lisenses 33493 CONTRATOR: Mell Class: Type Equipperfit: Type Equipperfit: Contract Peanor City	Name: American Warrior, Inc.	//			
Contract Person. Cell O'Brate Phone: 550-275-9231 Contract Person. Cell O'Brate Phone: 550-275-9231 Contract Cell O'Brate Cell O'Brate Contract Cell O'Brate Contract Cell O'Brate Cell	P.O. Box 399				
Contry Rocks Control Rocks Co	City/State/Zin: Garden City, KS	67846-0399		(Note: Locate well on the Section Plat on reverse side)	
Lease Name - Dechaert-Music - U.S. R.S. Well #. **2	Contact Person. Cecil O'Brate				
Field Name: American Eagle Drilling	Phone: 620-275-9231			Lease Name: Dechant Muir U.S. 183 well #:#2	
Name: American Eagle Drilling Well Zeliss:				Field Name: Maddy North	
Target Formation(s): Arbuckle	CONTRACTOR: License# 3349	J		Is this a Prorated / Spaced Field?	No
Ground Surface Elevation: 19716 teet MSL teet MSL Ground Surface Elevation: 19716 teet MSL teet MS	Name: Afferican Lagre Driving	9		Target Formation(s): Arbuckle	
Gas Storage Pool Ent. Air Rotary Gas	Well Ditilled For:	Well Class: Tvo	e Equipment:	Nearest Lease or unit boundary: 1140	
Gas Storage Pool Ext Gable G			. /		
Disposal GoMO Disposal Goble			•		
Seismic:s of Holes Other		= =			No
Other			,		
Now					-
Operator: Well Name: Original Completion Date: Original Total Depth: Directional, Deviated or Horizontal wellbore? If Yes, true vertical depth: Bottom Hole Location: (CC DKT #: Will Orans be taken? If Yes, proposed zone: AFFIDAVIT The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. MAY 1 6 2005 The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. MAY 1 6 2005 The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. MAY 1 6 2005 The undersigned hereby affirms that the drilling and eventual plugging of this well will comply with K.S.A. 55 et. seq. MAY 1 6 2005 KCC WICHITA 3. The minimum amount of surface pipe as specified below shall be set by circulating cement to the top; in all cases surface pipe shall be set through all unconsolidated materials plus a minimum of 20 feet into the underlying formation. 4. If the well is dry hole, an argement between the operator and the district office on plug length and placement is necessary prior to pluggling; 5. The appropriate district office will be notified before well is either plugged or production casing is comented in; 6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water our surface within 120 days of spud date. Or pursuant to Appendix 'B' - Eastern Kansas surface casing order #133,991-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. In all cases, NOTIFY district office prior to any cementing. Per KCC Use ONLY API # 15				Surface Pipe by Alternate: 1 2	
Well Name: Original Completion Date: Original Total Depth: Directional, Deviated or Horizontal wellbore? If Yes, true vertical depth: Bottom Hole Location: Well Farm Pond Other Water Source for Drilling Operations: Well Farm Pond Other DWR Permit #: Will Cores be taken? Will Cores be taken? Will Cores be taken? Well Seam Pond Other Water Source for Drilling Operations: Well Farm Pond Other Will Cores be taken? Will Cores be taken? Will Cores be taken? Well Seam Pond Other Water Source for Drilling Operations: Well Farm Pond Other Will Cores be taken? Well Farm Pond Other Will Cores be taken? Well Farm Pond Other Well Farm Pond Other Water Source for Drilling Operations: Well Farm Pond Other Water Source for Drilling Operations: Well Farm Pond Other Water Source for Drilling Operations: Well Farm Pond Other Water Source for Drilling Operations: Well Farm Pond Other Water Source for Drilling Operations: Well Farm Pond Other Water Source for Drilling Operations: Well Farm Pond Other Water Source for Drilling Operations: Well Farm Pond Other Water Source for Drilling Operations: Water Source for Drilling Operations or Drilling Operation or Operation or Agent: Water Source for D	If OWWO: old well information as	s follows:		Length of Surface Pipe Planned to be set: 200+	_
Original Completion Date: Original Total Depth: Water Source for Drilling Operations: Water Source Sour	Operator:		7.777.00	Length of Conductor Pipe required: None	
Water Source for Drilling Operations: Water Source Source for Drilling Operations: Water Source for Drilling Operations: Water Source for Drilling Operations: Water Source Sou	Well Name:			Projected Total Depth: 3450	
If Yes, true vertical depth: DWR Permit #:	Original Completion Date:	Original To	tal Depth:		
If Yes, true vertical depth: DWR Permit #:	Directional Deviated or Herizonta	al wallbore?	Vac / No		
Will Cores be taken?					
Will Cores be taken? If Yes, proposed zone: RECEIVED AFFIDAVIT The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. MAY 1 6 2005 It is agreed that the following minimum requirements will be met: 1. Notify the appropriate district office prior to spudding of well; 2. A copy of the approved notice of intent to drill shall be posted on each drilling rig; 3. The minimum amount of surface pipe as specified below shall be set by circulating cement to the top; in all cases surface pipe shall be set through all unconsolidated materials plus a minimum of 20 feet into the underlying formation. 4. If the well is dry hole, an agreement between the operator and the district office or production of pro	•			_	
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I hereby certify that the statements made herein are true and to the best of my knowledge and belief. Date: 5-/3-05 Signature of Operator or Agent:					ing
For KCC Use ONLY API # 15 - 16 3 - 23 4 5 6 0000 Conductor pipe required NGNE feet per Alt. > 2 Approved by: RSP 5- 19.05 This authorization void if drilling not started within 6 months of effective date.) Spud date:Agent:	must be completed within	30 days of the spud	date or the well shall	be plugged. In all cases, NOTIFY district office prior to any cementing.	
For KCC Use ONLY API # 15 - 163 - 2345 6 · 0000 Conductor pipe required	I hereby certify that the stateme	ents made herein are	true and to the best of	f my knowledge and belief.	
For KCC Use ONLY API # 15 - 163 - 2345 6 · 0000 Conductor pipe required				2/-	
For KCC Use ONLY API # 15 - 163 - 2345 6 · 0000 Conductor pipe required	Date: <u>3 - / S - ② </u> Si	gnature of Operator of	or Agent: June /	Title: Deilling MANAGE	
For KCC Use ONLY API # 15 - 163 - 2345 6 · 00 · 00 Conductor pipe required			V '		
API # 15 - 163 - 2345 6 · 00 · 00 Conductor pipe required	For KCC Use ONLY				1
Conductor pipe required	ADIA 15 162-7	3456.0	DO:01	• • • • • • • • • • • • • • • • • • • •	
Minimum surface pipe required 200 feet per Alt. > 2 Approved by: R S P S - 19 - 05 This authorization expires: II - 19 - 05 (This authorization void if drilling not started within 6 months of effective date.) Spud date: Agent: Signature of Operator or Agent: Signature of Operator or Agent:				•	12
Approved by: RSC5-19.05 This authorization expires: II-19-05 (This authorization void if drilling not started within 6 months of effective date.) Spud date:Agent:	' ' ' ' '	200		- Notify appropriate district office 48 hours prior to workover or re-entry;	W
This authorization expires: 11-19-05 (This authorization void if drilling not started within 6 months of effective date.) Spud date:Agent:			feet per Alt. 🗲 📵		í
(This authorization void if drilling not started within 6 months of effective date.) Spud date: Agent: Signature of Operator or Agent:	Approved by: RSP5	-19.05		 Obtain written approval before disposing or injecting salt water. 	
(This authorization void if drilling not started within 6 months of effective date.) Spud date: Agent: Signature of Operator or Agent:	This authorization expires: [[-	19-05			1 .
Spud date: Agent: Signature of Operator or Agent:					
			ths of effective date.)	check the box below and return to the address below.	Ø
Date:			ths of effective date.)		∝
	Spud date:	not started within 6 mon	iths of effective date.)	Well Not Drilled - Permit Expired	∞

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the Intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15 - Operator: American Warrior, Inc. Lease: Dechant-Muir Well Number: #2					Location of We	II: County: ROOKS	The state of the s
					4140'	feet from	N / ✓ S Line of Section
					2400'	feet from	feet from
					Sec. 23	Twp. 8 S. R.	
Field: Maddy No	orth						
No					Is Section:	Regular or Irre	gular
Number of Acres QTR / QTR / QTI		0111	- NW	NE/4			
uik/uik/uii	n or acrea	ge:					m nearest corner boundary.
					Section corner	used: NE NW	SE SW
				DI .	AT		
				PL			
		(Show lo	cation of the w	ell and shade attribut	table acreage for	prorated or spaced wells	s.)
		•		ootage to the nearest		•	,
			(0/101/70	olage to the hearest	loade of anii boa	ilidaly iilio.)	
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				l	'		

NOTE: In all cases locate the spot of the proposed drilling locaton.

In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.

SEWARD CO.

- 2. The distance of the proposed drilling location from the section's south / north and east / west.
- 3. The distance to the nearest lease or unit boundary line.
- 4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).