

ORIGINAL

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

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 4058
 Name: AMERICAN WARRIOR Inc
 Address: P.O.Box 399,
 City/State/Zip: Garden city, KS 67846
 Purchaser: ANR
 Operator Contact Person: Kevin Wiles SR
 Phone: (620) 275-2963
 Contractor: Name: Duke Drilling
 License: 5929
 Wellsite Geologist: Alan Downing
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: _____
 Well Name: _____
 Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. NA
 Other (SWD or Enhr.?) _____ Docket No. _____

11-5-03	11-18-03	2-13-04
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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API No. 15 - 033-21,383-00-00
 County: Comanche 10' N & 70'E of
C S/2 N/2 NE Sec. 31 Twp. 33s S. R. 19 East West
980' feet from S N (circle one) Line of Section
1250' feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Girk trust Well #: 8
 Field Name: Collier Flat East
 Producing Formation: miss
 Elevation: Ground: 1884' Kelly Bushing: 1897'
 Total Depth: 6214' Plug Back Total Depth: 6214'
 Amount of Surface Pipe Set and Cemented at 608' Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from perf 5260'
 feet depth to 4000' w/ 150 _____ sx cmt.
ATI WAM 4/12/06
 Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 12,000 ppm Fluid volume 320 bbls
 Dewatering method used Hauled Off-site
 Location of fluid disposal if hauled offsite:
 Operator Name: KBW Oil & Gas
 Lease Name: Harmon SWD License No.: 5993
 Quarter NW Sec. 11 Twp. 33s S. R. 20 East West
 County: Comanche Docket No.: D-98,329

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 of 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: _____
 Title: Production Supt. Date: 3-4-04
 Subscribed and sworn to before me this 3th day of March
 2004.
 Notary Public: Debra J. Purcell
 Date Commission Expires: 11/10/07
 DEBRA J. PURCELL
 Notary Public - State of Kansas
 My Appt. Expires 11/10/07

KCC Office Use ONLY
 Letter of Confidentiality Attached DPW
 If Denied, Yes Date: 03-18-04 (20)
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

X

Operator Name: AMERICAN WARRIOR Inc Lease Name: Girk trust Well #: 8
 Sec. 31 Twp. 33s S. R. 19 East West County: Comanche 10' N & 70'E of

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual IND, CDNL/GR, Micro, Sonic	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>4262'</td> <td>-2365</td> </tr> <tr> <td>Lansing</td> <td>4452'</td> <td>-2555</td> </tr> <tr> <td>Pawnee</td> <td>5073'</td> <td>-3176</td> </tr> <tr> <td>Fort Scott</td> <td>5115'</td> <td>-3218</td> </tr> <tr> <td>Cherokee</td> <td>5126'</td> <td>-3229</td> </tr> <tr> <td>miss</td> <td>5231'</td> <td>-3334</td> </tr> <tr> <td>Viola</td> <td>6128'</td> <td>-4231</td> </tr> </table>	Name	Top	Datum	Heebner	4262'	-2365	Lansing	4452'	-2555	Pawnee	5073'	-3176	Fort Scott	5115'	-3218	Cherokee	5126'	-3229	miss	5231'	-3334	Viola	6128'	-4231
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CASING RECORD <input checked="" type="checkbox"/> New <input 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#	608	standard	425	2%gel, 3%cc
production	7-7/8"	5-1/2"	17#	6150'	SMDC	200	1/4#flocele D-air

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Perf 5260'	SMDC	150	3%cc, 1/4# flocele

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	5222'-5228'	750 gals 20% FE Acid,	same
		20,000#s 20/40 sand in cross-linker gel	same
OH	6150'- 6214'	1500 gals 2-% FE Acid	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-1/16 steel@5250	2-1/16:sealite@6140'	6140'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method		
SI 2/23/04 <i>KCC WITHM PERVICDF</i>			<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
SI	SI	SI	SI		

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION

Production Interval Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

ORIGINAL

ALLIED CEMENTING CO., INC. 14051

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Med Lodge

DATE: <u>11-5-03</u>	SEC. <u>31</u>	TWP. <u>33S</u>	RANGE <u>19W</u>	CALLED OUT <u>2:00 PM</u>	ON LOCATION <u>3:00 PM</u>	JOB START <u>5:30 PM</u>	JOB FINISH <u>6:00 PM</u>
LEASE: <u>G.R.K. Trust</u>	WELL # <u>8</u>	LOCATION <u>Coldwater 55-74</u>		COUNTY <u>Comanche</u>	STATE <u>KS</u>		
OLD OR (NEW) (Circle one)		to MM #171 4s 1E E into					

CONTRACTOR Duke #7

TYPE OF JOB Surface

HOLE SIZE 8 7/8" x 23" T.D. 610

CASING SIZE 8 7/8" x 23" DEPTH 608

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL Raffle DEPTH 574

PRES. MAX 200 MINIMUM _____

MEAS. LINE _____ SHOE JOINT 34

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 56 3/4 BBLs Fresh #8

OWNER American Warrior

CEMENT

AMOUNT ORDERED: 225 5x65.35-6 + 36cc + 1/4" Flo-seal

200 5x Class A 3% cc + 2 flo gel

COMMON <u>A 200</u>	@	<u>7.15</u>	<u>1430.00</u>
POZMIX _____	@	_____	_____
GEL _____	@	<u>10.00</u>	<u>40.00</u>
CHLORIDE _____	@	<u>30.00</u>	<u>450.00</u>
_____	@	_____	_____
<u>Life weight 225</u>	@	<u>6.70</u>	<u>1507.50</u>
<u>Flo seal 56</u>	@	<u>1.40</u>	<u>78.40</u>
HANDLING <u>458</u>	@	<u>1.15</u>	<u>526.70</u>
MILEAGE <u>55 x 458 x .05</u>			<u>1259.50</u>

EQUIPMENT

PUMP TRUCK CEMENTER Justin Hart

368-265 HELPER Eric Brewer

BULK TRUCK

359-250 DRIVER Thad Cantrell

BULK TRUCK

_____ DRIVER _____

RECEIVED

TOTAL 5292.10

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KCC WICHITA SERVICE

DEPTH OF JOB <u>610</u>		
PUMP TRUCK CHARGE <u>0-300'</u>		<u>520.00</u>
EXTRA FOOTAGE <u>310</u>	@ <u>.50</u>	<u>155.00</u>
MILEAGE <u>55</u>	@ <u>3.50</u>	<u>192.50</u>
PLUG <u>8 7/8" TRP</u>	@ <u>100.00</u>	<u>100.00</u>
_____	@ _____	_____
_____	@ _____	_____

TOTAL 967.50

REMARKS:

Pipe on BTM Break Circ

5 BBLs Fresh #8

225 5x 65.35-6 @ 6.70

200 5x A 3% cc 2 flo gel @ 15.2

Release Plug 1/2" 36 3/4 BBLs

Fresh #8, 1/2" Plug 100-200

Shut head in Did not Circ Cement

Top off 100 5x A 3% @ 15.2

Circulated Cement to Surface

CHARGE TO: American Warrior

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

8 7/8"

1 Raffle @ 45.00 45.00

2 Baskets @ 180.00 360.00

_____ @ _____ _____

_____ @ _____ _____

_____ @ _____ _____

TOTAL 405.00

To Allied Cementing Co., Inc.

You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE ~~405.00~~

DISCOUNT ~~405.00~~ IF PAID IN 30 DAYS

SIGNATURE Kenneth McGuire

KENNETH MCGUIRE
PRINTED NAME

IF APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING



CHARGE TO:
AMERICAN WARRIOR INC.
 ADDRESS
 CITY, STATE, ZIP CODE

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TICKET
 NO 6121

PAGE 1 OF 2

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. # 8	LEASE GURK TRUST	COUNTY/PARISH COMANCHE	STATE KS	CITY	DATE 11-13-03	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR DUKE BRIDGES # 7	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE GAS	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 5 1/2" LONGSPEAK	WELL PERMIT NO.	WELL LOCATION PROTECTED - 2 E, 5 S, 1 1/4 E, NS		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 104	80		MC		2.50	200.00
578		1			PUMP SERVICE	1		JOB	6150	1200.00	1200.00
280		1			FLOCHER - 21	850		GAL		1.50	1275.00
402		1			CONTRACTORS	10		CA	5 1/2"	44.00	440.00
403		1			CEMENT BASKETS	2		EA		125.00	250.00
407		1			INSERT FLOAT SHOE W/FULL UP	1		EA		230.00	230.00
406		1			CATCH DOWN PLUG - BAFFLE	1		EA		200.00	200.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *Kenneth McNeil*
 DATE SIGNED 11-18-03 TIME SIGNED 1330 A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	# 3795	00
TAX	# 4965	98
TOTAL		

ORIGINAL

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR
Wanda Wilson

APPROVAL

Thank You!



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 6121

CUSTOMER AMERICAN WARRIOR I.L.C. WELL GURK TRUST # 8 DATE 11-18-03 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		QTY.		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			UM	UM				
330		1				SWIFT MULIX-DENSITY STANDARD	200	SPS			9.75	1950.00
276		1				FLOCELE	50	UGS			90	4500
285		1				CFR-1	100	UGS			2.75	275.00
287		1				GASSTOP	400	UGS			4.50	1800.00
581		1				SERVICE CHARGE						
583		1				MILEAGE CHARGE						
						TOTAL WEIGHT	20470		LOADED MILES	80		
						CUBIC FEET	200		TON MILES	818.8	1.00	200.00
											.85	695.98

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CONTINUATION TOTAL 4965.98

JOB LOG

SWIFT Services, Inc. ORIGINAL

DATE **11-18-03** PAGE NO. **1**

CUSTOMER **AMERICAN WARRIOR P.C.** WELL NO. **" 8 "** LEASE **GURK TRUST** JOB TYPE **5 1/2" LONGSTRING** TICKET NO. **6121**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GEAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1230							ON LOCATION
	1330							START 5 1/2" CASING IN WELL
								TD - 6150 SET = 6149
								TP - 6155 5 1/2" #/FT 17
								ST - 34.21
								CONNECTIONS - 1, 3, 5, 8, 11, 15, 26, 28, 30, 33
								COIT BKTS - 2, 27
	1545							DROP BALL - CALCULATE WELL
	1625	6	5		✓			500 PUMP SPACER
	1628	6	20		✓			500 PUMP 850 GAL FLOCHER
	1629	6	5		✓			500 PUMP SPACER
	1632							PLUG RH-MH
	1640	6 1/4	73		✓			500 MIX COMST - 200 SKS SMD W/ADAPTORS
	1652							WASH OUT PUMP. LEVEL
	1652							RELEASE LATCH DOWN PLUG
	1653	6 1/2	0		✓			DISPLACE PLUG
		6	141		✓		900	
	1716	6	142.0				1200	PLUG DOWN
							1200	PSE UP LATCH IN PLUG
								RECEIVED
								MAR 08 2004
								KCC WICHITA
	1720						OK	RELEASE PSE - HELD
								WASH UP
	1800							JOB COMPLETE

THANK YOU
WAYNE DUSTY