

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4058
Name: American Warrior, Inc.
Address: P. O. Box 399
City/State/Zip: Garden City, KS 67846
Purchaser: NCRA
Operator Contact Person: Joe Smith
Phone: (620) 275-2963
Contractor: Name: Berentz Drilling Company, Inc.
License: 5892
Wellsite Geologist: Steven P. Murphy, PG
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

API No. 15 - 065-23,132 - 00-00
County: Graham
NW SW NE SW Sec. 31 Twp. 7 S. R. 21 East West
1730 FSL feet from S / N (circle one) Line of Section
1360 FWL feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Van Loenen Well #: 2
Field Name: WILDCAT
Producing Formation: Arbuckle
Elevation: Ground: 2160.8' Kelly Bushing: 2165.8'
Total Depth: 3760' Plug Back Total Depth: 3738'
Amount of Surface Pipe Set and Cemented at 218 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1783 Feet
If Alternate II completion, cement circulated from 1783
feet depth to Surface w/ 170 sx cmt.

RECEIVED
KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WICHITA, KS
MAR 07 2006
03-07-06

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. _____
_____ Other (SWD or Enhr.?) _____ Docket No. _____
1-25-06 2-1-06 2-20-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 1500 ppm Fluid volume 400 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite:
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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: [Signature]
Title: Compliance Coordinator Date: 3-3-06
Subscribed and sworn to before me this 3rd day of March
20 06
Notary Public: [Signature]
Date Commission Expires: 09-12-09

ERICA KUHLMIEER
Notary Public - State of Kansas
My Appt. Expires 09-12-09

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
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MAR 07 2006
KCC