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KCC WICHITA

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

ORIGINAL

Operator: License # 4058  
Name: American Warrior, Inc.  
Address: P. O. Box 399  
City/State/Zip: Garden City, KS 67846  
Purchaser: N/A  
Operator Contact Person: Kevin Wiles, Sr.  
Phone: (620) 275-2963  
Contractor: Name: Cheyenne Drilling, LP  
License: 33375

Wellsite Geologist: None (Lost Hole)  
Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)  
If Workover/Re-entry: LOST HOLE 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. \_\_\_\_\_

<u>5-1-05</u>	<u>Skid Rig 5-2-05</u>	<u>Plugged 5-2-05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 069-20,255-00-01  
County: Gray  
NE NE NW Sec. 3 Twp. 29S S. R. 30  East  West  
330 feet from S  (circle one) Line of Section  
2310 feet from E  (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE  (NW) SW  
Lease Name: Reed Well #: 1-3 OWWO  
Field Name: U. S. 50  
Producing Formation: N/A  
Elevation: Ground: N/A Kelly Bushing: N/A  
Total Depth: 1838 Plug Back Total Depth: N/A  
Amount of Surface Pipe Set and Cemented at 1663 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set N/A Feet  
If Alternate II completion, cement circulated from N/A  
feet depth to N/A w/ N/A sx cmt.  
ALT IWHM 10-17-06

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used \_\_\_\_\_  
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: Production Supervisor Date: 11-05-05

Subscribed and sworn to before me this 5<sup>th</sup> day of NOVEMBER

20 05  
Notary Public: [Signature]



Date Commission Expires: 09-12-09

**KCC Office Use ONLY**  
NO Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

✓

X

Operator Name: American Warrior, Inc. Lease Name: Reed Well #: 1-3 OWWO
Sec. 3 Twp. 29S S. R. 30 [ ] East [x] West County: Gray

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 [ ] Yes [x] No (Attach Additional Sheets)

Samples Sent to Geological Survey [ ] Yes [x] No

Cores Taken [ ] Yes [x] No

Electric Log Run [ ] Yes [x] No (Submit Copy)

List All E. Logs Run:

[ ] Log Formation (Top), Depth and Datum [ ] Sample Name Top Datum

CASING RECORD [ ] New [ ] Used Report all strings set-conductor, surface, intermediate, production, etc. Table with columns: 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.

ADDITIONAL CEMENTING / SQUEEZE RECORD Table with columns: Purpose (Perforate, Protect Casing, Plug Back TD, Plug Off Zone), Depth Top Bottom, Type of Cement, #Sacks Used, Type and Percent Additives.

PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated. Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth. Table with columns: Shots Per Foot, PERFORATION RECORD, Acid, Fracture, Shot, Cement Squeeze Record, Depth.

TUBING RECORD Size Set At Packer At Liner Run [ ] Yes [x] No

Date of First, Resumerd Production, SWD or Enhr. Producing Method [ ] Flowing [ ] Pumping [ ] Gas Lift [ ] Other (Explain)

Estimated Production Per 24 Hours Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas [ ] Vented [ ] Sold [ ] Used on Lease (If vented, Submit ACO-18.) METHOD OF COMPLETION [ ] Open Hole [ ] Perf. [ ] Dually Comp. [ ] Commingled [x] Other (Specify) Plugged Production Interval

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