

For KCC Use: 1-28-07
 Effective Date: _____
 District # 1
 SGA? Yes No

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION

CORRECTED

Form C-1
 December 2002

NOTICE OF INTENT TO DRILL

Form must be Typed
 Form must be Signed
 All blanks must be Filled

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

Expected Spud Date May 1, 2007
 month day year

OPERATOR: License# 4058
 Name: American Warrior, Inc.
 Address: Box 399
Garden City, KS 67846
 City/State/Zip:
 Contact Person: Cecil O'Brate
 Phone: 620-275-5067

* CONTRACTOR: License# 5822
 * Name: VAL Energy, Inc.

Well Drilled For: * Well Class: Type Equipment:

<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input type="checkbox"/> Infield	<input checked="" type="checkbox"/> Mud Rotary
<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input type="checkbox"/> Pool Ext.	<input type="checkbox"/> Air Rotary
<input type="checkbox"/> OWWO	<input type="checkbox"/> Disposal	<input checked="" type="checkbox"/> Wildcat	<input type="checkbox"/> Cable
<input type="checkbox"/> Seismic; _____ # of Holes	<input type="checkbox"/> Other		
<input type="checkbox"/> Other			

If OWWO: old well information as follows:
 Operator: _____
 Well Name: _____
 Original Completion Date: _____ Original Total Depth: _____

Directional, Deviated or Horizontal wellbore? Yes No
 If Yes, true vertical depth: _____
 Bottom Hole Location: _____
 KCC DKT #: _____

Spot East
 * SE SE NW NW Sec. 29 Twp. 30 S. R. 23 West
 * 1000 feet from N / S Line of Section
 * 1000 feet from E / W Line of Section
 Is SECTION Regular Irregular?

(Note: Locate well on the Section Plat on reverse side)
 County: Clark
 Lease Name: Esplund Farms Well #: 5-29
 Field Name: _____

Is this a Prorated / Spaced Field? Yes No
 * Target Formation(s): Mississippi
 * Nearest Lease or unit boundary: 1000 feet MSL
 * Ground Surface Elevation: 2505 feet MSL

Water well within one-quarter mile: Yes No
 Public water supply well within one mile: Yes No
 Depth to bottom of fresh water: 180
 Depth to bottom of usable water: 180
 Surface Pipe by Alternate: 1 2

* Length of Surface Pipe Planned to be set: 600
 Length of Conductor Pipe required: _____
 * Projected Total Depth: 5000 ft
 * Formation at Total Depth: Mississippi

Water Source for Drilling Operations:
 Well Farm Pond Other _____
 DWR Permit #: _____

(Note: Apply for Permit with DWR)
 Will Cores be taken? Yes No

* WAS: Contractor Jovde Murfin Drilling Co.
 IS: " 5822 Val Energy, Inc.
 * WAS Well Class: Infield
 IS: Well Class: Wildcat

* WAS: 869 FNL 995 FNL
 IS: 1000 FNL 1000 FNL

AFFIDAVIT

If Yes, proposed zone: _____
 * WAS: Target Arbuckle NUB: 869
 IS: Target Mississippi NUB: 1000
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 APR 25 2007
 * WAS: Elev. 2447 Surf pipe: 700
 IS: Elev. 2505 Surf pipe 600
 * WAS: Pto 5400 Arbuckle
 IS: Pto 5000 Mississippi
 WICHITA, KS

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.
 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 on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-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.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 4/25/07 Signature of Operator or Agent: [Signature] Title: Agent

For KCC Use ONLY
 API # 15 - 025-21400-0000
 Conductor pipe required None feet
 Minimum surface pipe required 200 feet per Alt. 1
 Approved by: [Signature]
 This authorization expires: 7-23-07
 (This authorization void if drilling not started within 6 months of approval date.)
 Spud date: _____ Agent: _____

Remember to:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed;
- Obtain written approval before disposing or injecting salt water.
- If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.

Well Not Drilled - Permit Expired
 Signature of Operator or Agent: _____
 Date: _____

29
30
23W

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

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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 - 025-21400-0000
Operator: American Warrior, Inc.
Lease: Esplund Farms
Well Number: 5-29
Field: _____
Number of Acres attributable to well: _____
QTR / QTR / QTR of acreage: NW SE - SE NW - NW

Location of Well: County: Clark
1000 _____ feet from N / S Line of Section
1000 _____ feet from E / W Line of Section
Sec. 29 Twp. 30 S. R. 23 East West

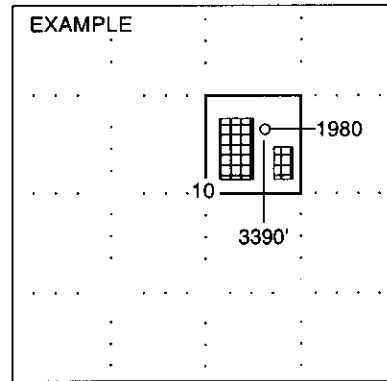
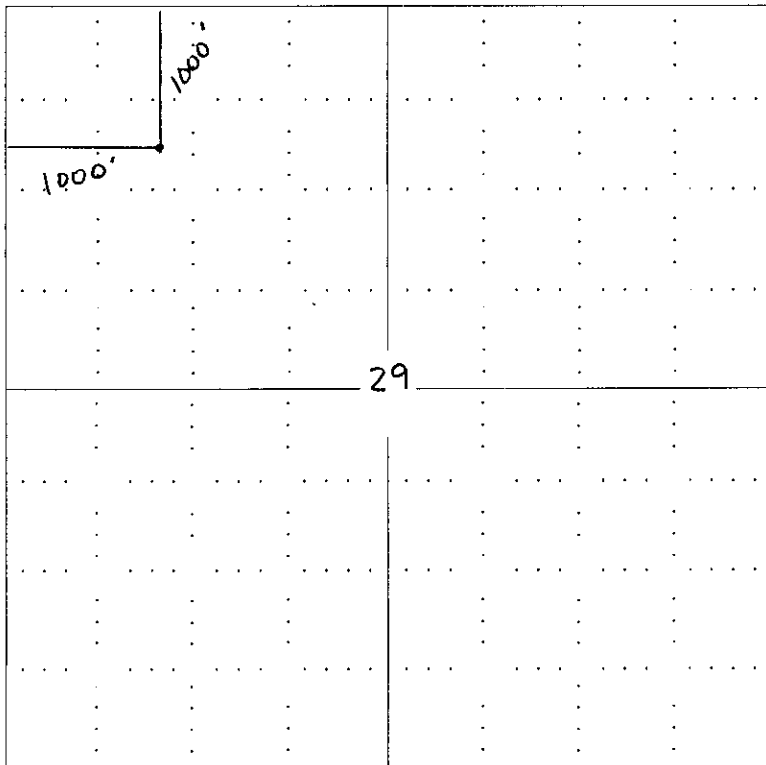
Is Section: Regular or Irregular

If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)
(Show footage to the nearest lease or unit boundary line.)



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

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, etc.
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).

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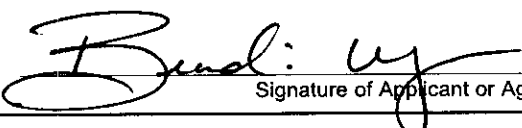
APR 25 2007

CONSERVATION DIVISION
WICHITA, KS

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE PIT**

Form CDP-1
April 2004
Form must be Typed

Submit in Duplicate

Operator Name: American Warrior, Inc		License Number: 4058
Operator Address: Box 399 Garden City, KS 67846		
Contact Person: Cecil O'Brate		Phone Number: (620) 275 - 9231
Lease Name & Well No.: Esplund Farms 5-29		Pit Location (QQQQ): NW SE SE NW NW Sec. 29 Twp. 30S R. 23 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1000 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 1000 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Clark County
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 3000 (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used? Clay Bottom
Pit dimensions (all but working pits): <u>125</u> Length (feet) <u>125</u> Width (feet) <u>1 SET</u> N/A: Steel Pits Depth from ground level to deepest point: <u>5</u> (feet)		
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.
Distance to nearest water well within one-mile of pit <u>1899</u> feet Depth of water well <u>40</u> feet		Depth to shallowest fresh water <u>10</u> feet. Source of information: <u>D</u> _____ measured _____ well owner _____ electric log _____ KDWR
Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: <u>Fresh Mud</u> Number of working pits to be utilized: <u>1 SET</u> Abandonment procedure: <u>Remove free fluids, let dry & cover</u> Drill pits must be closed within 365 days of spud date.
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		RECEIVED KANSAS CORPORATION COMMISSION APR 25 2007 CONSERVATION DIVISION WICHITA, KS
<u>4/25/07</u> Date	 Signature of Applicant or Agent	
KCC OFFICE USE ONLY		
Date Received: <u>4/25/07</u> Permit Number: _____ Permit Date: _____ Lease Inspection: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

CORRECTED

15-0025-21400-0000