



For KCC Use: 7-23-07  
 Effective Date: \_\_\_\_\_  
 District # 4  
 SGA?  Yes  No

KANSAS CORPORATION COMMISSION 1010427  
 OIL & GAS CONSERVATION DIVISION

Form C-1  
 November 2005  
 Form must be Typed  
 Form must be Signed  
 All blanks must be Filled

**NOTICE OF INTENT TO DRILL**

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

Expected Spud Date: 08/09/2007  
 month day year

OPERATOR: License# 4058  
 Name: American Warrior, Inc.  
 Address 1: PO BOX 399  
 Address 2: \_\_\_\_\_  
 City: GARDEN CITY State: KS Zip: 67846  
 Contact Person: Cecil O'Brate  
 Phone: 620-275-7461

CONTRACTOR: License# 31548  
 Name: Discovery Drilling

Well Drilled For:  Oil  Gas  Seismic; # of Holes \_\_\_\_\_  
 Enh Rec  Storage  Disposal  
 Other: \_\_\_\_\_

Well Class:  Infield  Pool Ext.  Wildcat  Other

Type Equipment:  Mud Rotary  Air Rotary  Cable

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 #: \_\_\_\_\_

**REQUESTED LEASE INFO WITH SIGNED INTENT** *rcv'd 7-17-07*

Spot Description: \_\_\_\_\_  
 \_\_\_\_\_ E2 - SE - NW Sec. 1 Twp. 8 S. R. 22  E  W  
 (2000) 1,890 feet from  N /  S Line of Section  
2,437 feet from  E /  W Line of Section

Is SECTION:  Regular  Irregular?  
 (Note: Locate well on the Section Plat on reverse side)

County: Graham  
 Lease Name: Miller-Buckner Well #: 1-1  
 Field Name: BUCKNER

Is this a Prorated / Spaced Field?  Yes  No  
 Target Formation(s): LKC & Arbuckle

Nearest Lease or unit boundary line (in footage): 203  
 Ground Surface Elevation: 2125 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: 900

Surface Pipe by Alternate:  I  II  
 Length of Surface Pipe Planned to be set: 200

Length of Conductor Pipe (if any): 0  
 Projected Total Depth: 4150

Formation at Total Depth: Arbuckle  
 Water Source for Drilling Operations:

Well  Farm Pond  Other: \_\_\_\_\_  
 DWR Permit #: \_\_\_\_\_

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

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.  
 It is agreed that the following minimum requirements will be met:

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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: July 12, 2007 Signature of Operator or Agent: Thomas H. A. Title: Agent

**For KCC Use ONLY**  
 API # 15 - 065-23327-0000  
 Conductor pipe required 0 feet  
 Minimum surface pipe required 200 feet per ALT.  I  II  
 Approved by: Rmt 7-18-07  
 This authorization expires: 1-18-08  
 (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 (within 60 days);
- 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 Date: \_\_\_\_\_  
 Signature of Operator or Agent: \_\_\_\_\_

1  
8  
22  
 E  
 W



1010427

**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 - 065-23327-000  
Operator: American Warrior, Inc.  
Lease: Miller-Buckner  
Well Number: 1-1  
Field: BUCKNER

Location of Well: County: Graham  
1,890 feet from  N /  S Line of Section  
2,437 feet from  E /  W Line of Section  
Sec. 1 Twp. 8 S. R. 22  E  W

Number of Acres attributable to well: \_\_\_\_\_  
QTR/QTR/QTR/QTR of acreage: \_\_\_\_\_ - E2 - SE - NW

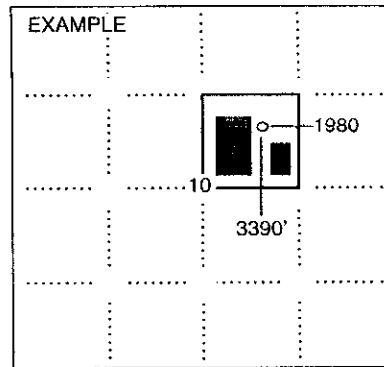
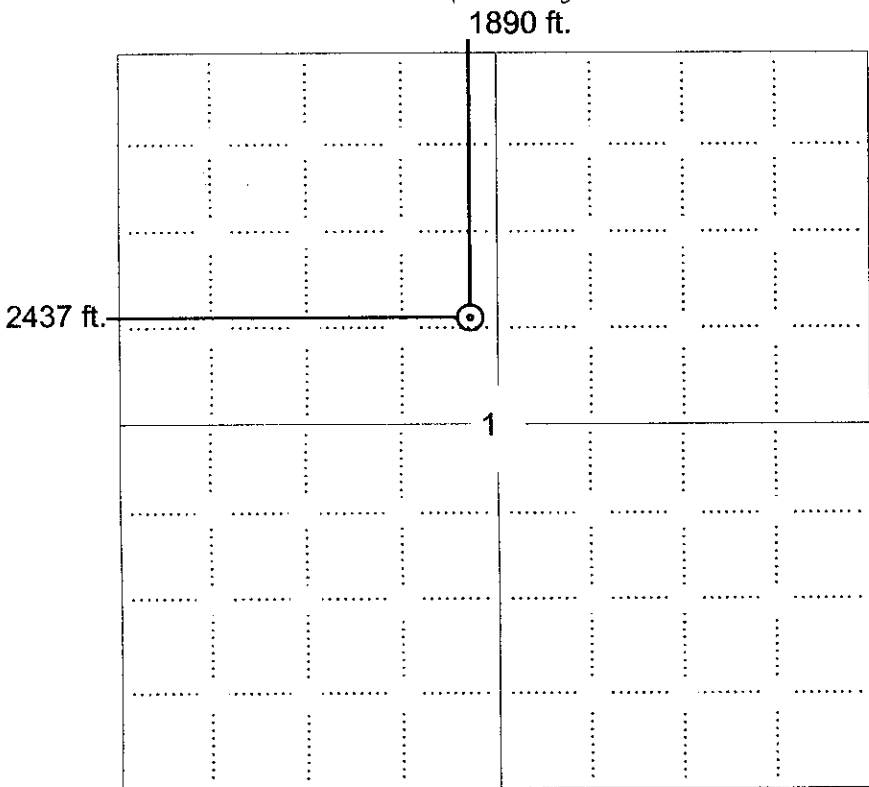
Is Section:  Regular or  Irregular

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



KANSAS CORPORATION COMMISSION 1010427  
 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: PO BOX 399		GARDEN CITY KS 67846	
Contact Person: Cecil O'Brate		Phone Number: 620-275-7461	
Lease Name & Well No.: Miller-Buckner 1-1		Pit Location (QQQQ): E2    SE    NW Sec. 1 Twp. 8 R. 22 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1,890 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 2,437 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Graham 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 <i>(If WP Supply API No. or Year Drilled)</i>		Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 3,000 (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
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? Lined with clay soil, native and fresh mud.	
Pit dimensions (all but working pits): 70 Length (feet) 70 Width (feet)		<input type="checkbox"/> N/A: Steel Pits	
Depth from ground level to deepest point: 5 (feet)		<input type="checkbox"/> No Pit	
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.	
		<b>RECEIVED</b> <b>JUL 16 2007</b> <b>KCC WICHITA</b>	
Distance to nearest water well within one-mile of pit N/A feet    Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR	
<b>Emergency, Settling and Burn Pits ONLY:</b> 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		<b>Drilling, Workover and Haul-Off Pits ONLY:</b> Type of material utilized in drilling/workover: Fresh Mud Number of working pits to be utilized: 3 Abandonment procedure: Allow liquid contents to evaporate, let cuttings dry and backfill. 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.			
July 12, 2007 Date		 Signature of Applicant or Agent	
<b>KCC OFFICE USE ONLY</b>			
Date Received: 7/16/07		Permit Number: _____	
Permit Date: 7/16/07		Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS <input type="checkbox"/>			

15-065-23327-0222