KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form ACO-1 September 1999 Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE ORIGINAL CONCIDENTIAL

Operator: License # 4058	API No. 15 - 159-22,416-00-00
Name: American Warrior Inc.	County: Rice
Address: P.O. Box 399 RECEIVED	C -NW - SW - NE Sec. 6 Twp. 18 S. R. 10 ☐ East West
City/State/7in. Garden City Ks. 67846	3630' feet from S N (circle one) Line of Section
Purchaser: NRCA JUN 0 4 2004	2310' feet from (circle one) Line of Section
Operator Contact Person: Kevin Wiles	Footages Calculated from Nearest Outside Section Corner:
Phone: (<u>620</u>) <u>272-4996</u>	(circle one) NE SE NW
Contractor: Name: Discovery Drilling Co. Inc.	Lease Name: Alice "A" Well #: 2
License: 31548	Field Name: Bloomer
Wellsite Geologist: Alan Downing	Producing Formation: Arbuckle
Designate Type of Completion: !UN 0 3 2004	Elevation: Ground: 1777' Kelly Bushing: 1785
Designate Type of Completion:	Total Depth: 3331' Plug Back Total Depth: 3309'
✓ OilSWDSIOWTemp. Abd.	Amount of Surface Pipe Set and Cemented at 318' Feet
Gas ENHR SIGW	Multiple Stage Cementing Collar Used?
Dry Other (Core, WSW, Expl., Cathodic, etc)	If yes, show depth setFeet
If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from
Operator:	feet depth tow/sx cmt.
Well Name:	A
Original Comp. Date:Original Total Depth:	Drilling Fluid Management Plan ALTIWHM Z-LZ-0
Deepening Re-perfConv. to Enhr./SWD	Chloride content 14,000 ppm Fluid volume 320 bbls
Plug BackPlug Back Total Depth	Dewatering method used Evaporation
Commingled Docket No	
Dual Completion Docket No	Location of fluid disposal if hauled offsite:
Other (SWD or Enhr.?) Docket No	Operator Name:
2/24/04 2/28/04 4/2/04	Lease Name: License No.:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
Recompletion Date Recompletion Date	County: Docket No.:
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas 67202, within 120 days of the spud date, recompletion, workover information of side two of this form will be held confidential for a period of 12 107 for confidentiality in excess of 12 months). One copy of all wireline logs at TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells.	or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. months if requested in writing and submitted with the form (see rule 82-3-nd geologist well report shall be attached with this form, ALL CEMENTING
All requirements of the statutes, rules and regulations promulgated to regulate herein are complete and correct to the best of my knowledge.	the oil and gas industry have been fully complied with and the statements
Signature:	KCC Office Use ONLY
Title: Foreman Date: 6/3/04	Letter of Confidentiality Received
Subscribed and sworn to before me this	If Denied, Yes Date:
204	Wireline Log Received
D. hug	Geologist Report Received
Notary Public: Justine Turille	UIC Distribution
Date Commission Expires: Notary Public - Etate of Kenses	
My Apot. Expires 11 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

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Side Two

ORIGINAL

Operator Name: Ar	nerican Warrior I	nc.		Lease	e Name:	Alice "A"		Well #: _2	· ·	
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tested, time tool op- temperature, fluid re	Show important tops en and closed, flowing ecovery, and flow ratings gs surveyed. Attach	ng and shi es if gas t	ut-in pressures o surface test,	, whether s along with	hut-in pr	essure reache	d static level, hydr	ostatic pressu	ests giving interval res, bottom hole led. Attach copy of a	
Drill Stem Tests Tak		~	Yes No		✓ l	.og Forma	tion (Top), Depth	and Datum	Sample	
Samples Sent to Ge	eological Survey		Yes ✓ No		Nan Top			Top 2550'	Datum -764	
Cores Taken			Yes ✓ No		-	bner		2805'	-1019	
Electric Log Run (Submit Copy)		✓.	Yes No		Tord		KCC	2824'	-1037	
List All E. Logs Run	:					gies		2832'	-1046	
Dead Independent	- David O				Lan	_	N 0 3 2004	2931'	-1145	
Bond.	n,Duai Comp	ual Compensated Porosity,			BKC	1 1 11	FIDENTIAL	3189' -1404		
Dona.	ond.				Arbi	uckle	a de Silver	3216'	-1431	
		Rep	CASING ort all strings set-	RECORD	✓ Nurface, int		ction, etc.			
Purpose of String	Size Hole Drilled	s	ize Casing	Wei	ight	Setting	Type of	# Sacks	Type and Percent	
Surface	121/4"	Set (In O.D.) 85/8		23#	/ FL	Depth Ceme		210	Additives 2%gel,3%CC	
Production	77/8	51/2		15.5		3329'	STD	150	1/4# flocele	
			ADDITIONAL	L CEMENTI	NG / SQL	JEEZE RECOR	D			
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement			Used	Type and Percent Additives			S	
Shots Per Foot	Specify	Footage of	RD - Bridge Plug Each Interval Per	gs Set/Type rforated			acture, Shot, Cement Imount and Kind of Ma		rd Depth	
2	3219' to 3222'					250 gal 159	% MCA			
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		JUL	V 0 4 2004							
		KCC	WICHIT	ΓΑ						
TUBING RECORD	Size	Cot At		D! *						
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Date of First, Resumer	d Production, SWD or I	Enhr.	Producing Met	hod	Flowing	y Pumpi		t \ \ Othe	ər <i>(Explain)</i>	
Estimated Production Per 24 Hours	Oil	Bbls.	ł	Mcf	Wate	***************************************		as-Oil Ratio	Gravity	
Disposition of Gas	METHOD OF (COMPLETIC	NA ON		NA	Production Inte	rval			
Vented Sold	Used on Lease		Open Hole	✓ Bord						
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S	ervices,	Inc.

CHARGE TO:		
AMERICAN WAS	26.4° 205.9°	
ADDRESS	ALUX COM	
	6	
CITY, STATE, ZIP CODE		

TICKET
Nº 6424

CITY, STATE, ZIP CODE		•	· · · · · · · · · · · · · · · · · · ·
Services, Inc.		PAGE	OF
SERVICE COCATIONS WELL/PROJECT NO. LEASE COUNTY/PARISH STATE CITY		<u> </u>	12
Auto "A"		DATE O	WNER
TICKET TYPE CONTRACTOR		2-29-04	SAME
U SALES DESCRIPTION (VIA		ORDER NO.	
WELL CATEGORY JOB PURPOSE WELL PERMIT			
EFERRAL OCATION		WELL LOCATION	
INVOICE INSTRUCTIONS SALE ROBUSTED		CARU-VY 3 E	1/25, 1/2 W
PRICE SECONDARY REFERENCE/ ACCOUNTING		•	
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SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO SWIFT SERVICES, INC. WILL TOUR NEEDS? OUR SERVICE WAS PERFORMED WITHOUT DELAY?		-L	
MLAMORY MY DELIVERA DE COUDO 1			2116
		1	111001
AND PERFORMED JOB CALCULATIONS		TAY	44181
P.O. BOX 466 NESS CITY, KS 67560 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? ARE YOU SATISFIED WITH OUR SERV		TAX	4498 1371

SWIFT OPERATOR WASO,

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

785-798-2300

Thank You!

4635 99

TOTAL

CUSTOMER DID NOT WISH TO RESPOND



PO Box 466 Ness City, KS 67560

TICKET CONTINUATION

No. 6424

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KCC WICHITA

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