

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: _____
 Operator Contact Person: Jody Smith **RECEIVED**
 Phone: (620) 272-1023
 Contractor: Name: Cheyenne Drilling Inc. **APR 12 2004**
 License: 5382 **KCC WICHITA**
 Wellsite Geologist: None
 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: 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. _____

3/10/04	3/13/04	3/31/04
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

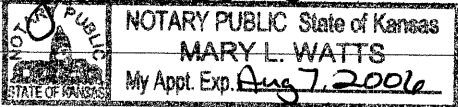
API No. 15 - -075-208110000
 County: Hamilton
 C SW SW Sec. 33 Twp. 21 S. R. 40 East West
660' N 647 feet from S N (circle one) Line of Section
4620' W 4759 feet from E W (circle one) Line of Section
KCC 6PS
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Gilcrease Well #: 1-33
 Field Name: Bradshaw
 Producing Formation: None
 Elevation: Ground: 3565' Kelly Bushing: 3570'
 Total Depth: 3153' Plug Back Total Depth: 3133'
 Amount of Surface Pipe Set and Cemented at 327' Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT I WASH
 (Data must be collected from the Reserve Pit) 6-4-07
 Chloride content 12,000 ppm Fluid volume 120 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: Foreman Date: 4/7/04
 Subscribed and sworn to before me this 9th day of April,
 2004.
 Notary Public: [Signature]
 Date Commission Expires: _____



KCC Office Use ONLY

NO Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

X

ORIGINAL

Operator Name: American Warrior Inc. Lease Name: Gilcrease Well #: 1-33
 Sec. 33 Twp. 21 S. R. 40 East West County: Hamilton

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 No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Gamma Ray/Neutron, Bond log

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

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CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
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
Surface	121/4	85/8	24#	327'	Common	230	
Production	77/8	51/2	15.5	3152'	SMDS	470	Flocele 1/4#

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	surface 1000'	SMDS	150	Flocele 1/4#

Shots Per Foot	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
2spf	2790 to 2796	500 gal 15% FE	
2spf	2802 to 2808	500 gal 15% FE	
2spf	2838 to 2846	500 gal 15%FE	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	0	0	0	0

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) Dry

Production Interval _____

ORIGINAL

ALLIED CEMENTING CO., INC. 14005

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
OAKLEY

DATE <u>3-10-04</u>	SEC. <u>33</u>	TWP. <u>215</u>	RANGE <u>40 W</u>	CALLED OUT	ON LOCATION <u>7:30 PM</u>	JOB START <u>10:15 PM</u>	JOB FINISH <u>2:15 AM</u>
LEASE <u>GELCREASE</u>	WELL# <u>1-33</u>	LOCATION <u>SYRACUSE 13N-24E-N INTD</u>			COUNTY <u>HAMILTON</u>	STATE <u>KS</u>	
OLD OR (NEW) (Circle one)							

CONTRACTOR CHEYENNE OPLG. REG. #11 OWNER SAME

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4" T.D. 327'

CASING SIZE 8 7/8" DEPTH 327'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15

PERFS. _____

DISPLACEMENT 19 3/4 BBL

CEMENT

AMOUNT ORDERED 190 SKS COM 3% CC 28 6EL

100 SKS COM 3% CC FOR ONE-INCH

USED 40 SKS COM 3% CC ON ONE-INCH

COMMON	<u>230 SKS</u>	@	<u>8 35</u>	<u>1920 50</u>
POZMIX		@		
GEL	<u>4 SKS</u>	@	<u>10 00</u>	<u>40 00</u>
CHLORIDE	<u>8 SKS</u>	@	<u>30 00</u>	<u>240 00</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>304 SKS</u>	@	<u>1 15</u>	<u>349 00</u>
MILEAGE	<u>0.5¢ PER SK / MILE</u>			<u>1520 00</u>

EQUIPMENT

PUMP TRUCK CEMENTER TERRY

177 HELPER WAYNE

BULK TRUCK

218 DRIVER LARRY

BULK TRUCK

212 DRIVER JARRON

RECEIVED TOTAL 4070 00

REMARKS:

MIX 190 SKS COM 3% CC 28 6EL

DISPLACED 19 3/4 BBL WATER. CEMENT

DID NOT CIRCULATE. ORDER 100 SKS

COM 3% CC TO ONE-INCH. STARTED JOB

AT 10:15 PM FINISHED MIXING 190 SKS AT

10:45 PM. RUN 40' ONE-INCH MIX

40 SKS CEMENT CIRCULATE TO SURFACE

KCC WICHITA SERVICE

DEPTH OF JOB 327'

PUMP TRUCK CHARGE 520 00

EXTRA FOOTAGE @ _____

MILEAGE 100 MILE @ 3 50 350 00

PLUG @ _____

TOTAL 870 00

CHARGE TO: AMERICAN WARRIOR, INC.

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

TOTAL _____

To Allied Cementing Co., Inc.

You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE John Marston

John Marston
PRINTED NAME

MAR. 17 2004 01:23PM P2



CHANGE TO
AMERICA WELDRZ EJS
 ADDRESS
 CITY, STATE, ZIP CODE

TICKET No **6619**
ORIGINAL

PAGE	OF
1	1

PHONE NO. :

FROM :

WELL/PROJECT NO 1-33	LEASE GILHOUSE	COUNTY/PARISH HAMPTON	STATE KS	CITY	DATE 3-12-04	OWNER SAME
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR CHESSIE BULL #1	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOWDOWN	ORDER NO.	
WELL TYPE GAS	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 5 1/2" LONGSTRAW	WELL PERMIT NO.	WELL LOCATION TRACBANK # - 215, 2 1/4, 2S		
INVOICE INSTRUCTIONS						

QUANTITY	SECONDARY REFERENCE PART NUMBER	ACCORDING TO			DESCRIPTION	QTY.		UNIT		PRICE	AMOUNT
		LOC	AGCT	DF		QTY.	UNIT	QTY.	UNIT		
		1			LEASE # 104	120	ME			2.50	300.00
		1			WELL SERVICE	1	WELL	3.5	WELL	1200.00	1200.00
		1			EQUIP KILL	2	GAL			19.00	38.00
		1			WELL FRESH	500	GAL			.60	300.00
		1			WELL FLOAT SHOE W/FELUP	1	EA	5 1/2"		230.00	230.00
		1			WELL SERVICES	10	EA			44.00	440.00
		1			WELL BASKETS	3	EA			125.00	375.00
		1			WELL DOLL PLUG - RAFFLE	1	EA			200.00	200.00
		1			WELL MULTI-WELLER STALLARD	470	WELL			9.75	4582.50
		1			WELL	118	WELL			.90	106.20
		1			WELL SERVICE	470	WELL			1.00	470.00
		1			WELL						

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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

x *Neil Perney*
 DATE SIGNED **3-12-04** TIME SIGNED **2:00** SIGNATURE **ELAM R.P.M.**

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY	AGREE	DIS DECIDED	DIS AGREE	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					10629.72
WE MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TAX	
<input type="checkbox"/> CUSTOMER CONTROL WISE TO RESPOND				TOTAL	

CUSTOMER ACCEPTANCE OF MATERIAL AND SERVICES The customer hereby acknowledges receipt of the material and services described on this invoice.

SWIFT OPERATOR APPROVAL

Thank You!

03/17/2004 01:23 PM 1702740186

FROM :

PHONE NO. :

MAR. 17 2004 01:25PM P3

JOB LOG

CHART NO.	TIME	RATE (BPM)	VOLUME (GALLONS)	PRESSURE (PSI)		OPERATION AND MATERIALS
				INJURING	CASING	
	1130					ON LOCATED
	1200					START 5 1/2" CIRCULO W/ WELL
						TD - 3153 SITE 3150
						TD - 3150 5 1/2" #14
						ST - 19.48
						CORRECTORS = 1, 3, 5, 8, 12, 16, 20, 25, 45, 48
						CUT - BKT = 5, 15, 46
	0130					DROP BALL - CIRCULATE
	0200	6	12	✓	450	PUMP 500 GAL MULTIFLEX
	0202	6	20	✓	450	PUMP 20 BBS KCL - FRESH
	0207	6 1/2	166	✓	350	MAX CONCT - 300 SKS 11.2 PPG
		6	47	✓	300	170 SKS 14.0 PPG
	0245					WASH OUT PUMP LINKS
	0247					RELEASE LATCH DOWN PLUG
	0248	6 1/2	0	✓		DIAPHRAGM PLUG (1000L DSR - LOST CIRCULATION)
		6	76	✓	300	NO CIRCULATION
	0300		76.4		1550	PLUG DOWN - PSE UP LATCH 2nd PLUG
					OK	RELEASE PSE - HELM
						CIRCULATE 0 SKS CONCT TO POT
						WASH UP
	0400					JOB COMPLETE

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THANK YOU
 WARRIE, RUSSEY, BLAKE



CHARGE TO: AMERICAN WARRIOR EXC.
 ADDRESS: **ORIGINAL**
 CITY, STATE, ZIP CODE:

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 KCC WICHITA

TICKET NO 6652

PAGE 1 OF 1

SERVICE LOCATIONS: 1. NESS CITY, KS
 WELL/PROJECT NO.: 1-33
 LEASE: GEORGE
 COUNTY/PARISH: HAMILTON
 STATE: KS
 CITY:
 DATE: 3-19-04
 OWNER: SAME
 TICKET TYPE: SERVICE SALES
 CONTRACTOR: SOUTHWEST WELL SERVICE
 RIG NAME/NO.:
 SHIPPED VIA: CT
 DELIVERED TO: LOUPOW
 ORDER NO.:
 WELL TYPE: GAS
 WELL CATEGORY: DEVELOPMENT
 JOB PURPOSE: SOURCE PERFORMANCE
 WELL PERMIT NO.:
 WELL LOCATION: DEBANK KS - 2 1/2, 2 1/4 E, W
 REFERRAL LOCATION:
 INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M		
575		1			MILEAGE # 104	120	MC			2.50	300.00
577		1			PUMP SERVICE	1	JOB	1000	FT	750.00	750.00
330		1			SWIFT MULTI-DENSITY SWAP	150	SKS			9.75	1462.50
276		1			FLOCC	38	LB			90	3420
581		1			SERVICE CHARGE COMPT	150	SKS			1.00	150.00
583		1			DAMAGE	14978	LB	898.68	TM	85	76388

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *[Signature]*
 DATE SIGNED: 3-19-04
 TIME SIGNED: 1000
 A.M.
 P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY			AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	3460.58
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?							
WE UNDERSTOOD AND MET YOUR NEEDS?						TAX	
OUR SERVICE WAS PERFORMED WITHOUT DELAY?							
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?						TOTAL	
ARE YOU SATISFIED WITH OUR SERVICE?			<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND							

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

SWIFT OPERATOR: *Wade Wason*
 APPROVAL:

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 3-19-04 PAGE NO. 1

CUSTOMER AMERICAN WOODCOCK LK WELL NO. 1-33 LEASE GELCRASE JOB TYPE SQUEEZE PERFORMANCES TICKET NO. 6652

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0930							ON LOCATION
								2 3/8 x 5 1/2 ORIGINAL
								PERFS = 1000'
								PUL = 808' (SQUEEZE)
	1015				✓		1000	TEST TUBING @ 1055' - C/S - 1KVA
	1035				✓		300	PULL PUL TO 808' - SET ^{SWIFT} LOAD ANALYSIS TEST
	1040	3	3	✓			600	2 SQUEEZE RATE - BLOW
	1045	3	69	✓			450 MG	MAX COMP 100 S/D - 1/4 FLOOR 100 = 11.2 MG SD = 14.0 PP6 (5 BBL CRT MIXED - CALCULATED MUD TO PUL)
	1108							WASHOUT AMP - LOW
	1110	2 1/2	0	✓			500	ADJACE COMP
	1112	2	6 1/2	✓			625	" SHUT DOWN (CMT = 950')
	1115						325	HOLDING PT - SHUT DN (CALCULATED 30 S/D TO PUL)
								WASHUP
	1200							JOB COMPLETE
								THANK YOU
								WASH, DUSTY, SLUDGE

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AGG. WICHITA