

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 4058
Name: American Warrior Inc.
Address: P.o. Box 399
City/State/Zip: Garden City Ks. 67846
Purchaser: NCRA
Operator Contact Person: Cecil O'Brate
Phone: (620) 275-9231
Contractor: Name: American Eagle Drilling, LLC.
License: 33439
Wellsite Geologist: Alan Downing

API No. 15 - 065-23031-00-00
County: Graham
C NW NE NW Sec. 13 Twp. 10 S. R. 21 East West
570'FNL feet from S / N (circle one) Line of Section
1430'FWL feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Gindy & Suzanne Well #: 1-13
Field Name: Cooper
Producing Formation: Arbuckle

Elevation: Ground: 2280' Kelly Bushing: 2287'
Total Depth: 3925' Plug Back Total Depth: 3907'
Amount of Surface Pipe Set and Cemented at 226' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1785' Feet
If Alternate II completion, cement circulated from 1785'
feet depth to surface w/ 130sx. sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 11,000 ppm Fluid volume 300 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.: _____

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. _____

<u>3/30/05</u>	<u>4/8/05</u>	<u>4/21/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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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: 5/6/05

Subscribed and sworn to before me this 6th day of May, 2005

Notary Public: [Signature]
Date Commission Expires: 11/1/07

DEBRA J. PURCELL
Notary Public - State of Kansas
My Appt. Expires 11/1/07

KCC Office Use ONLY
YES Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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Side Two

ORIGINAL

Operator Name: American Warrior Inc. Lease Name: Cindy & Suzanne Well #: 1-13
 Sec. 13 Twp. 10 S. R. 21 East West County: Graham

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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	KCC	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anh		1753' +534
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	B/Anh	MAY 0 6 2005	1798' +489
List All E. Logs Run:		Topeka	CONFIDENTIAL	3291' -1004
		Heebner		3493' -1206
		Toronto		3518' -1231
		Lansing		3534' -1247
		B/KC		3754' 1467'
		Arbuckle		3814 -1527

Sonic, Micro, Dual induction, Porosity and Bond logs.

CASING RECORD <input checked="" type="checkbox"/> New <input 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	12 1/4	85/8	23#	226'	Common	160	2%gel, 3%CC
Production	77/8	5 1/2	14#	3924'	EA/2	150	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	3845' to 3849'	250 gal MCA	3845
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TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		23/8	3900'			
Date of First, Resumerd Production, SWD or Enhr.			Producing Method			
SI			<input type="checkbox"/> Flowing <input checked="" 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	
	SI	SI	SI			

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify) _____



CHARGE TO: American Warrior Inc
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET No 7985

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SERVICE LOCATIONS 1. <u>Hays, Ks.</u> 2. <u>Ness City Ks</u> 3. 4.	WELL/PROJECT NO. <u>#1</u>	LEASE <u>Cindy Suzanne</u>	COUNTY/PARISH <u>Graham</u>	STATE <u>Ks</u>	CITY	DATE <u>4-19-05</u>	OWNER <u>Same</u>
TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>KC Well Service</u>	RIG NAME/NO.	SHIPPED VIA <u>CH</u>	DELIVERED TO <u>Location</u>	ORDER NO.		
WELL TYPE <u>oil</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Cement Port Collar</u>	WELL PERMIT NO.	WELL LOCATION			
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE <u>#103</u>	40		mi		3 ⁰⁰	120 ⁰⁰
578		1			<u>Cement Pump Charge P.C.</u>	1		cu		1250 ⁰⁰	1250 ⁰⁰
288		1			<u>Sand ^{2%}/₄ Brady</u>	1		sk		12 ⁰⁰	12 ⁰⁰
330		2			<u>SMD Cement</u>	130		sts		10 ²⁵	1332 ⁵⁰
276		2			<u>Flocite</u>	44		#		1 ⁰⁰	44 ⁰⁰
581		2			<u>Cement Service Charge</u>	175		sts		1 ¹⁰	192 ⁵⁰
583		2			<u>Drayage</u>	343		sk		9 ⁰⁰	308 ⁷⁴

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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 [Signature]
 DATE SIGNED 4-19-05 TIME SIGNED 1830 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	3259 ⁷⁴
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Graham Co. TAX 5.55%	77
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TOTAL	3336 ⁸⁰
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

ORIGINAL

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

SWIFT OPERATOR Nick Korbe APPROVAL _____

Thank You!

CUSTOMER American Warrior Inc WELL NO. #1 LEASE Cindy Suzanne JOB TYPE Cement Port Cellar TICKET NO. 7985

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1415							on loc setup Trks 5 1/2" x 14" x 1785' P.C. Start RBP in hole set plug @ 3100' ±
	1525	4	0			150		load hole
	1544		75			1000		Test tools
	1600	2.5	0			150		spot sand end
			10					pull to P.C. locate P.C. Open P.C.
	1655							
	1656	2.5	3			250		Take inj rate
	1702	4	0			400		start cement
	1717	3	62/0			500		end cement / start displacement
	1719		6					shut down
	1720							close P.C.
	1721					1000		test csq run 3 jts
	1730	2.5	0			250 250		reverse out
	1737		15					hole clean run to RBP
	1815	3	0			250		circ sand off Plug
	1822		20					hole clean

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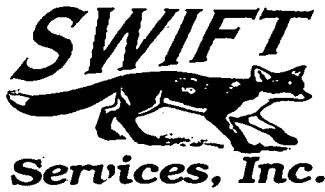
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5966
6030

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Thank you
Nick, Dan & Brett



CHARGE TO: *American Warrior Inc*
 ADDRESS:
 CITY, STATE, ZIP CODE:

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MAY 06 2005

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TICKET

No 7821

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PAGE 1 OF 2

SERVICE LOCATIONS 1. <i>Hays, KS</i> 2. <i>Ness City, KS</i> 3. 4.	WELL/PROJECT NO. <i>#1</i>	LEASE <i>Cindy Suzanne</i>	COUNTY/PARISH <i>Graham</i>	STATE <i>Ks</i>	CITY	DATE <i>4-8-05</i>	OWNER <i>Same</i>
	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>American Eagle</i>	RIG NAME/NO.	SHIPPED VIA <i>CH</i>	DELIVERED TO <i>Location</i>	ORDER NO.	
	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cement Logging</i>	WELL PERMIT NO.	WELL LOCATION		
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE <i>#103</i>	40	mi			3 ⁰⁰	120 ⁰⁰
578		1			<i>Cement Logging</i>	1	ea	3925	ft	1250 ⁰⁰	1250 ⁰⁰
281		1			<i>Mud Flush</i>	500	gal			65	325 ⁰⁰
221		1			<i>KCL Liquid</i>	2	gal			19 ⁰⁰	38 ⁰⁰
407		1			<i>Insert Float Shoe</i>	1	ea	5 1/2	"	230 ⁰⁰	230 ⁰⁰
406		1			<i>L.D. Plug & Baffle</i>	1	ea			200 ⁰⁰	200 ⁰⁰
403		1			<i>Basket</i>	1	ea			140 ⁰⁰	140 ⁰⁰
402		1			<i>Centralizers</i>	8	ea			55 ⁰⁰	440 ⁰⁰
404		1			<i>Part Collar</i>	1	ea			1600 ⁰⁰	1600 ⁰⁰
419		1			<i>Rotating head</i>	1	ea			200 ⁰⁰	200 ⁰⁰

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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 *[Signature]*
 DATE SIGNED *4-8-05* TIME SIGNED *1615* 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		
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				PAGE TOTAL 1	4543
WE UNDERSTOOD AND MET YOUR NEEDS?				page 2	2169
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				subtotal	6712
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Graham Co. TAX	271
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	6984
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					13

ORIGINAL

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

SWIFT OPERATOR *Nick Korbo* APPROVAL _____

Thank You!



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 7821

CUSTOMER *American Warrior Inc* WELL *Ciddy Suzanne #1* DATE *4-8-05* PAGE *2* OF *2*

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PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			QTY	UM	QTY	UM		
325		2				<i>Standard Cement</i>	150		sk		7.50	1125.00
284		2				<i>Calseal</i>	7		sk		28.00	196.00
283		2				<i>Salt</i>	800		#		17	136.00
285		2				<i>CFR-2</i>	73		#		3.00	219.00
276		2				<i>Flocele</i>	38		#		1.00	38.00
581						SERVICE CHARGE					1.10	165.00
583						MILEAGE CHARGE					.90	290.90
						TOTAL WEIGHT						16161
						LOADED MILES						40
						CUBIC FEET						150 sks
						TON MILES						323,22

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CONTINUATION TOTAL 2169.90

CUSTOMER American Warrior WELL NO. #1 LEASE Cindy-Suzanne JOB TYPE Cement Logging TICKET NO. 7821

Table with columns: CHART NO., TIME, RATE (BPM), VOLUME (BBL) (GAL), PUMPS (T, C), PRESSURE (PSI) (TUBING, CASING), DESCRIPTION OF OPERATION AND MATERIALS. Includes handwritten entries for operations like 'Start FE', 'Break circ', 'Plug RA', 'Start Displacement', and 'Bump plug'.

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Thank you Nick & crew

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MAY 0 6 2005

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SERVICE POINT: 2

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

DATE <u>3-31-05</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>2:45am</u>	JOB FINISH <u>3:15am</u>
<u>ANDY</u> LEASE <u>SIZWINE</u>	WELL # <u>1</u>	LOCATION <u>PAUCO 35 2 1/2 W</u>		COUNTY <u>GRAHAM</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR AMERICAN EAGLE
 TYPE OF JOB SURFACE
 HOLE SIZE 12 1/4 T.D. 225
 CASING SIZE 8 7/8 DEPTH 225
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 10-15'
 PERFS.
 DISPLACEMENT 13 1/4 BBL

OWNER
 CEMENT
 AMOUNT ORDERED 1160 1000 3% GEL
290 GEL
 COMMON 1160 @ 8.30 1328.00
 POZMIX @
 GEL 3 @ 13.00 39.00
 CHLORIDE 5 @ 36.00 180.00
 ASC @
 @
 @
 @
 @
 @
 @
 @
 @
 @
 HANDLING 1168 @ 2.50 252.00
 MILEAGE .055/3K/mi. 582.12
 TOTAL 2381.12

EQUIPMENT

PUMP TRUCK CEMENTER MARK
 # 366 HELPER SIDNEY
 BULK TRUCK
 # 213 DRIVER LARY
 BULK TRUCK
 # DRIVER

REMARKS:

CEMENT OVER

SERVICE

DEPTH OF JOB
 PUMP TRUCK CHARGE 1025.00
 EXTRA FOOTAGE @
 MILEAGE 63 mi. @ 4.50 283.50
 @
 @
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TOTAL 908.50

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CHARGE TO: AMERICAN WARRIOR
 STREET
 CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

MANIFOLD @
8 7/8 wood @ 35.00
 @
 @
 @
 @
 TOTAL 35.00

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 Don Anderson

Don Anderson
PRINTED NAME