

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

Operator: License # 4058
Name: American Warrior Inc.
Address: P.O. Box 399
City/State/Zip: Garden City Kansas 67846
Purchaser: NCRA
Operator Contact Person: Cecil O'Brate
Phone: (620) 275-7461
Contractor: Name: Discovery Drilling Co., Inc
License: 31548
Wellsite Geologist: Alan Downing

API No. 15-163-23447-00-00
County: Rooks
NE NW NE Sec. 6 Twp. 10 S. R. 20 East West
330' feet from (N) (circle one) Line of Section
1735' feet from (E) (circle one) Line of Section

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Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Keller Well #: 1-6
Field Name: Cooper
Producing Formation: Arbuckle
Elevation: Ground: 2279' Kelly Bushing: 2287'
Total Depth: 4000' Plug Back Total Depth: 3970'
Amount of Surface Pipe Set and Cemented at 222' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1754' Feet
If Alternate II completion, cement circulated from 1754'
feet depth to surface w/ 125 sx cmt.

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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>3/29/05</u>	<u>4/2/05</u>	<u>4/14/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

Drilling Fluid Management Plan ALT II W/HM
(Data must be collected from the Reserve Pit) 6-5-07
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.: _____

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: 4/29/05
Subscribed and sworn to before me this 29th day of April
2005
Notary Public: [Signature]
Date Commission Expires: 11/4/07

DEBRA J. PURCELL
Notary Public - State of Kansas
My Appt. Expires 11/4/07

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: Keller Well #: 1-6
Sec. 6 Twp. 10 S. R. 20 East West County: Rooks

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
Samples Sent to Geological Survey Yes No
Cores Taken Yes No
Electric Log Run Yes No
List All E. Logs Run:

Dual Compensated Porosity, Dual Induction, Microresistivity, Sonic and Bond.

Log Formation (Top), Depth and Datum Table with entries: Anhydrite 1781' +506, Topeka 3318' -1038, Heebner 3521' -1234, Toronto 3544' -1257, Lansing 3560' -1273, B/KC 3778' -1491, Arbuckle 3858' -1571

CASING RECORD Table with columns: Purpose of String, Size Hole Drilled, Size Casing Set, Weight Lbs./Ft., Setting Depth, Type of Cement, # Sacks Used, Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD Table with columns: Purpose, Depth Top Bottom, Type of Cement, #Sacks Used, Type and Percent Additives

PERFORATION RECORD - Bridge Plugs Set/Type Table with columns: Shots Per Foot, Specify Footage of Each Interval Perforated, Acid, Fracture, Shot, Cement Squeeze Record, Depth

TUBING RECORD Table with columns: Size, Set At, Packer At, Liner Run

Date of First, Resumerd Production, SWD or Enhr. Table with columns: Date, Producing Method

Estimated Production Per 24 Hours Table with columns: Oil Bbls., Gas Mcf, Water Bbls., Gas-Oil Ratio, Gravity

Disposition of Gas METHOD OF COMPLETION Production Interval
Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
Other (Specify)

CONFIDENTIAL ALLIED CEMENTING CO INC. ORIGINAL

KCC

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

APR 29 2005

SERVICE POINT:
RUSSELL

DATE 3-29-05	SEC. 6	TWP. 10	RANGE 20	ON LOCATION 10:00 AM	1:00 PM	JOB START 1:30 PM	JOB FINISH 2:00 PM
LEASE Keller	WELL# 1-6	LOCATION PAIRO BOOSTER STA.	COUNTY Rooks	STATE KANSAS			
OLD OR <input checked="" type="radio"/> NEW (Circle one)		1 S 1 1/2 W 14 S					

CONTRACTOR Discovery #1

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D. 224'

CASING SIZE 8 5/8 DEPTH 224'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 13 9/8 GAL

EQUIPMENT _____

OWNER _____

CEMENT AMOUNT ORDERED 150 SK Comm

22 GOC

3% CC

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

PUMP TRUCK CEMENTER GIRARD

366 HELPER Shane

BULK TRUCK DRIVER GARY

213 DRIVER _____

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REMARKS:

Cement

CIRCULATED

THANKS

CHARGE TO: AMERICAN WARRIOR INC.

STREET _____

CITY _____ STATE _____ ZIP _____

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.

SIGNATURE [Signature]

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

2 1/2" wooden Plug

MANIFOLD _____ @ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

ORIGINAL



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

TICKET No 7817

PAGE 1 OF 2

SERVICE LOCATIONS: *Hays, Ks.*
 WELL/PROJECT NO: *#1-6* LEASE: *Keller* COUNTY/PARISH: *Rooks* STATE: *Ks* CITY: DATE: *4-3-05* OWNER: *Same*
 2 *Ness City, Kc* TICKET TYPE: SERVICE SALES CONTRACTOR: *Discovery Drly* RIG NAME/NO. SHIPPED VIA: *air* DELIVERED TO: *Location* ORDER NO.
 WELL TYPE: *oil* WELL CATEGORY: *Development* JOB PURPOSE: *cement logging* 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 #103	40	mi			3.00	120.00
578		1			cement pump charge logging	1	ea	4000	ft	1250.00	1250.00
281		1			Mud Flush	500	gal			.65	325.00
221		1			KCL liquid	2	gal			18.00	36.00
407		1			Insert Float Shoe	1	ea	5 1/2	in	230.00	230.00
406		1			Latchdown Plug & Ball	1	ea			200.00	200.00
403		1			Basket	1	ea			140.00	140.00
402		1			Centralizers	7	ea			55.00	385.00
404		1			Part Collar	1	ea			1600.00	1600.00
419		1			Rotating head	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

Thomas
 DATE SIGNED: TIME SIGNED: 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	AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				page 2	2168.88
WE UNDERSTOOD AND MET YOUR NEEDS?					6654.88
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	
<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: APPROVAL:

Thank You!



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

TICKET CONTINUATION

TICKET No. 7817

CUSTOMER America Water Inc WELL Keller #1-6 DATE 4-30-05 PAGE 2 OF 2

ORIGINAL

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		QTY		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			U/M	U/M				
275		2				100	cks			7.50	1125.00	
284		2				7	cks			28.00	196.00	
283		2				800	#			17	136.00	
285		2				73	#			3.00	219.00	
276		2				37	#			1.00	37.00	
581		2				SERVICE CHARGE		CUBIC FEET		1.10	165.00	
583		2				MILEAGE CHARGE		TON MILES		.90	290.58	
						TOTAL WEIGHT	LOADED MILES					
						8,089.0	40					

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CONTINUATION TOTAL 2168.58

CUSTOMER Americas Warrior WELL NO. 1-6 LEASE Keller JOB TYPE Longstring TICKET NO. 7817

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 'on loc setup', 'plug RH + MH', 'start cement', 'wash PqL', 'Drop Plug', 'start displacement', 'Bump Plug', 'Release pressure float held'.

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Thank you Nick & crew



CHARGE TO: American Warrior Trac

ADDRESS:

CITY, STATE, ZIP CODE:

TICKET No 7825

PAGE 1 OF 1

1. SERVICE LOCATIONS <u>Hays, Ks</u>	WELL/PROJECT NO. <u>1-6</u>	LEASE <u>Keller</u>	COUNTY/PARISH <u>Rooks</u>	STATE <u>Ks</u>	CITY	DATE <u>4-11-05</u>	OWNER <u>S.M.C.</u>
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>K.C. Well Service</u>		RIG NAME/NO.	SHIPPED VIA <u>elt</u>	DELIVERED TO <u>Locations</u>	ORDER NO.	
3. WELL TYPE <u>oil</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Part Collar</u>		WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE		AMOUNT
		LOC	ACCT	DF								
<u>100</u>		<u>1</u>			MILEAGE	<u>40</u>	<u>mi</u>			<u>1</u>	<u>50</u>	<u>60.00</u>
<u>105</u>		<u>1</u>			<u>Part Collar top Rental w/man</u>	<u>1</u>	<u>ea</u>			<u>400</u>	<u>00</u>	<u>400.00</u>

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

By Nick Korbe

DATE SIGNED 4-11-05 TIME SIGNED 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? WE UNDERSTOOD AND 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	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

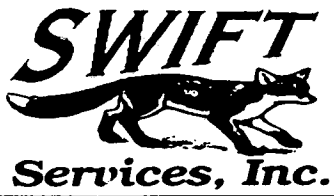
PAGE TOTAL	<u>460.00</u>
<u>Rooks Co. TAX 5.3%</u>	<u>24.38</u>
TOTAL	<u>484.38</u>

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!

ORIGINAL



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

TICKET No 7824

PAGE 1 OF 1

SERVICE LOCATIONS: *1. Hays, Ks. 2. Ness City, Ks.*

WELL/PROJECT NO. *#1-6* LEASE *Keller* COUNTY/PARISH *Rocks* STATE *Ks* CITY DATE *4-11-05* OWNER *Sumner*

TICKET TYPE: SERVICE SALES CONTRACTOR *KC Well Service* RIG NAME/NO. SHIPPED VIA *CH* DELIVERED TO *Location* ORDER NO.

WELL TYPE *oil* WELL CATEGORY *Development* JOB PURPOSE *Cement Post Cellar* 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							
<i>575</i>		<i>1</i>			<i>MILEAGE #103</i>	<i>40</i>	<i>mi</i>			<i>3.00</i>	<i>120.00</i>
<i>578</i>		<i>1</i>			<i>Cement pump charge (liner)</i>	<i>1</i>	<i>cu</i>	<i>1754</i>	<i>cu</i>	<i>1256.00</i>	<i>1256.00</i>
<i>330</i>		<i>2</i>			<i>SMD Cement</i>	<i>125</i>	<i>skt</i>			<i>10.25</i>	<i>1281.25</i>
<i>581</i>		<i>2</i>			<i>Cement Service Charge</i>	<i>200</i>	<i>skt</i>			<i>1.10</i>	<i>220.00</i>
<i>583</i>		<i>2</i>			<i>Drayage</i>	<i>391.04</i>	<i>TM</i>			<i>.90</i>	<i>351.94</i>

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

DATE SIGNED *4-11-05* TIME SIGNED 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?			
WE UNDERSTOOD AND 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	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	TOTAL
<i>3223.19</i>	<i>3291.10</i>
<i>Rocks Co. TAX 5.3%</i>	<i>67.91</i>

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. #1-6 LEASE Keller JOB TYPE cementliner TICKET NO. 7824

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 'locate P.C.', 'test casing', 'start cement', 'reverse out hole clean'.

Thank you
Nick, Dan, & Shane