

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM

Form ACO-1  
September 1999  
Form Must Be Typed

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:  
Operator Contact Person: Cecil O'Brate  
Phone: (620) 275-9231  
Contractor: Name: Discovery Drilling Co., Inc.  
License: 31548  
Wellsite Geologist: Ron Nelson

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.  
12/15/04 1/5/05 1/6/05  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 065-23,023-00-00  
County: Graham  
110 W of SW SE SE Sec. 33 Twp. 9 S. R. 21W  East  West  
330 feet from (S) (circle one) Line of Section  
1100 feet from (E) (circle one) Line of Section

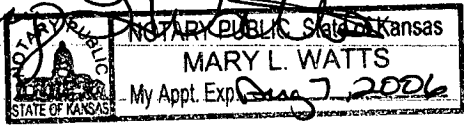
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE (SE) NW SW  
Lease Name: DeYOUNG Well #: 1-33  
Field Name: Cooper  
Producing Formation: None  
Elevation: Ground: 2274 Kelly Bushing: 2282  
Total Depth: 3895 Plug Back Total Depth:  
Amount of Surface Pipe Set and Cemented at 237.85 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 P+A KGR 6/25/07  
(Data must be collected from the Reserve Pit)  
Chloride content 8,000 ppm Fluid volume 320 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: [Handwritten Signature]  
Title: Foreman Date: 1/14/05  
Subscribed and sworn to before me this 14th day of January 2005  
Notary Public: [Handwritten Signature]  
Date Commission Expires: [Handwritten Signature]



KCC Office Use ONLY  
Letter of Confidentiality Attached  
If Denied, Yes  Date:  
Wireline Log Received  
Geologist Report Received  
UIC Distribution  
RECEIVED  
JAN 26 2005  
KCC WICHITA

Operator Name: AMERICAN WARRIOR, INC. Lease Name: DeYOUNG Well #: 1-33  
 Sec. 33 Twp. 9 S. R. 21W  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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	# Sacjs Used	Type and Percent Additives
Surface Pipe	12 1/4	8 5/8	23	237.85	Common	160	2%Gel&3%CC

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input 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

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

**METHOD OF COMPLETION**

Production Interval  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_



CHARGE TO: American Warrior  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP CODE: \_\_\_\_\_

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TICKET  
 No 7475

PAGE 1 OF 1

SERVICE LOCATIONS 1. <u>Hays, Ks.</u> 2. <u>Ness City, Ks.</u> 3. 4.	WELL/PROJECT NO. <u>1-33</u>	LEASE <u>DeYoung</u>	COUNTY/PARISH <u>Gr Graham</u>	STATE <u>Ks</u>	CITY	DATE <u>1-6-05</u>	OWNER <u>same</u>
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>Discovery Dr Lg</u>	RIG NAME/NO.	SHIPPED VIA <u>2/T</u>	DELIVERED TO <u>Location</u>	ORDER NO.		
WELL TYPE <u>oil</u>	WELL CATEGORY <u>New Well Plug</u>	JOB PURPOSE <u>PTA</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	40	mi			3.00	120.00
576		1			PTA	1	ea			550.00	550.00
410		1			Top Plug	1	ea	8 3/8	in	70.00	70.00
328		2			Swift Light 60/40 Poz 6%	200	sx			6.60	1320.00
276		2			Flocele	50	lb			1.00	50.00
581		2			Cement Service Charge	200	sx			1.10	220.00
583		2			Drayage	342	10/mi			.90	307.80

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 1-6-05 TIME SIGNED 1500  
 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	2637	80
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?				TAX	70	32
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	2714	12
<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 Nick Korbe APPROVAL \_\_\_\_\_

Thank You!

**JOB-LOG**

**SWIFT Services, Inc.**

DATE 7-6-05 PAGE NO. 7

CUSTOMER American Warrior WELL NO. 1-33 LEASE De Young JOB TYPE PTA TICKET NO. 7475

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1100							on loc setup Trk RTD 3895'
								1st Plug @ 1775' 25 sks 6 1/4" 6% gel
	1215	4	0			200		start wtr
	1228	4	8/0			200		start cement
	1221	4	7/0			100		start wtr
	1222	7	3/0			100		start mud
	1225		20			0		Balanced
								2nd plug @ 1000' 100 sks " " "
	1255	4	0			150		start wtr
	1257	4	8/0			150		start cement
	1308	4	30/0			50		start wtr
	1309		3			0		Balanced
								3rd plug @ 290' 40 sks " " "
	1330	4	0			100		start wtr
	1331	4	5/0			100		start cement
	1335	4	12/0			50		start wtr
	1336		2			0		Balanced
								4th plug 10 sks
	1430	1.5	3					RH 15 sks
	1435	1.5	4					MH 10 sks
	1440	1.5	3					

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Thank you  
Nick & crew

# ALLIED CEMENTING CO., INC. 18987

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

SERVICE POINT: R

DATE <u>12-15-04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>DE YOUNG</u>	WELL # <u>1-33</u>	LOCATION <u>CHURCH OF GOD IS 1/4 W</u>			COUNTY <u>GRAHAM</u>	STATE <u>KC</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR DISCOVERY #1

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D. 238

CASING SIZE 8 5/8 DEPTH 237

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 10-15'

PERFS. \_\_\_\_\_

DISPLACEMENT 14 BBL

**EQUIPMENT**

PUMP TRUCK CEMENTER MARK

# 366 HELPER GLEN

BULK TRUCK

# 362 DRIVER CARY

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

CEMENT CTCC

CHARGE TO: AMERICAN WARRIOR

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

OWNER \_\_\_\_\_

CEMENT

AMOUNT ORDERED: 160 Pom 3% CC  
290 GEL

COMMON	<u>160</u>	@	<u>7.85</u>	<u>1256.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>11.00</u>	<u>33.00</u>
CHLORIDE	<u>5</u>	@	<u>33.00</u>	<u>165.00</u>
ASC		@		

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HANDLING	<u>160</u>	@	<u>1.41</u>	<u>226.00</u>
MILEAGE	<u>54/SK</u>	@	<u>9.10/MILE</u>	<u>504.00</u>
TOTAL				<u>2184.00</u>

**SERVICE**

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_ 570.00

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE 60 @ 4.00 240.00

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

~~\_\_\_\_\_~~ @ \_\_\_\_\_

TOTAL 810.00

**PLUG & FLOAT EQUIPMENT**

<u>8 5/8 Plug</u>	@	<u>55.00</u>
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL		<u>55.00</u>

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 Thomas S. Alm

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

Thomas Alm

PRINTED NAME