

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-163-20,277-0000

LEASE NAME Thomas

WELL NUMBER B-1

990 Ft. from ~~XX~~ ^{N.} Section Line

990 Ft. from E Section Line

SEC. 24 TWP. 8 RGE. 18 (E or W)

COUNTY Rooks

Date Well Completed unknown

Plugging Commenced 4-12-99

Plugging Completed 4-12-99

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR American Warrior inc.

ADDRESS p.o. box 399, garden city, ks. 67846

PHONE (316) 275-2963 OPERATORS LICENSE NO. 4058

Character of Well oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 4-11-99 (date)

by District #4 (KCC District Agent's Name).

Is ACO-1 filed? yes if not, is well log attached? none on file

Producing Formation arbuckle Depth to Top 3407 Bottom 3413 T.D. 3413

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
	surface	surface	242	8-5/8	242	none
	production	surface	3409	5 1/2	3409	none

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from feet to feet each set
preforated @ 7780ft. & 1320ft. pump 35sks. cem. & 100# hulls down 8-5/8' @ 350#
SHUT IN @ 350# pump 125 sks. smds cement down 4 1/2' with 5 sks hulls
max press 400# shut in @ 100#

Name of Plugging Contractor Swift Services inc. License No. RECEIVED

STATE CORPORATION COMMISSION

Address p.o. box 466 NESS City, ks. 67560

JUL - 9 1999
JUL - 9, 1999

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Warrior inc.

CONSERVATION DIVISION
Wichita, Kansas

STATE OF Kansas COUNTY OF Finney, ss.

Kevin Wiles Sr. (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained and the log of the above-described well as filed the the same are true and correct, so help me God.

(Signature) [Signature]

(Address) p.o. box 399, Garden City, ks. 67846

SUBSCRIBED AND SWORN TO before me this 9th day of July, 1999
DEBRA J. PURCELL
Notary Public - State of Kansas
My Appt. Expires 11/1/99

Debra Purcell
Notary Public

My Commission Expires: NOV 4 1999