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AUG 12 2005

KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

KCC
AUG 10 2005

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

CONFIDENTIAL

WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

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: Jody Smith
Phone: (620) 272-1023
Contractor: Name: American Eagle Drilling
License: 33439 35493
Wellsite Geologist: Alan Downing

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. _____

6/13/05 6/19/05 7/6/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 163-23459-00-00
County: Rooks
C E2 SW NW Sec. 24 Twp. 9 S. R. 19 East West
3280' feet from (S) N (circle one) Line of Section
4230' feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Simon Well #: 1-24
Field Name: Jeunek
Producing Formation: Arbuckle
Elevation: Ground: 2122' Kelly Bushing: 2129'
Total Depth: 3552' Plug Back Total Depth: 3552'
Amount of Surface Pipe Set and Cemented at 225' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1470' Feet
If Alternate II completion, cement circulated from 1470'
feet depth to surface w/ 110 sx cmt.

Drilling Fluid Management Plan ALT II WITH
(Data must be collected from the Reserve Pit) 8-13-07
Chloride content _____ ppm Fluid volume _____ 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: 8/10/05
Subscribed and sworn to before me this 10th day of August,
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

KCC ORIGINAL
AUG 11 2005

Operator Name: American Warrior Inc. Lease Name: Simon Well #: 1-24
Sec. 24 Twp. 9 S. R. 19 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 (Attach Additional Sheets) | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Log | Formation (Top), Depth and Datum | <input checked="" type="checkbox"/> Sample |
| Samples Sent to Geological Survey | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name | Top | Datum |
| Cores Taken | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Anh | 1512' | +617 |
| Electric Log Run (Submit Copy) | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | B/Anh | 1546' | +583 |
| List All E. Logs Run: | | Topeka | 3957' | -928 |
| Gamma Ray/ Neutron and bond. | | Heebner | 3262' | -1133 |
| | | Toronto | 3282' | -1153 |
| | | Lansing | 3301' | -1172 |
| | | B/KC | 3520' | -1391 |
| | | Arbuckle | 3543' | -1414 |

| 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# | 225' | Com | 150 | 3%CC,2%gel |
| Production | 77/8" | 51/2" | 14# | 3546' | SMD | 150 | 1/4#Flocele |
| | | | | | | | |

| 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 Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| 0 | 3546' to 3552' OH | 3000 gal. 15%NEFE | |
| | | | |
| | | | |
| | | | |

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| | | | | |
|---------------|------|--------|-----------|---|
| TUBING RECORD | Size | Set At | Packer At | Liner Run |
| | 23/8 | 3546' | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

| | |
|--|---|
| Date of First, Resumerd Production, SWD or Enhr. | Producing Method |
| NA | <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 |
| | NA | MA | | | |

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: Other (Specify) _____



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

TICKET No 8026

PAGE 1 OF 2

| | | | | | | | |
|--|--|---------------------------------|---|--|--|-------------------------|-------|
| SERVICE LOCATIONS 1. <u>HAYS KS</u> | WELL/PROJECT NO. <u>1-24</u> | LEASE <u>Simon</u> | COUNTY/PARISH <u>Rooks</u> | STATE <u>KS</u> | CITY | DATE <u>06-19-05</u> | OWNER |
| 2. <u>Ness City KS</u> | TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES | CONTRACTOR | RIG NAME/NO. <u>American Eagle</u> | SHIPPED VIA <u>C.T.</u> | DELIVERED TO <u>4w, 1w, 1w, 1/2w, E into Pkinville KS</u> | ORDER NO. | |
| 3. | WELL TYPE <u>Oil</u> | WELL CATEGORY <u>Develop</u> | JOB PURPOSE <u>5 1/2 Long string</u> | WELL PERMIT NO. <u>15-163-23459-00-00</u> | WELL LOCATION <u>sd4, T9, e19w</u> | | |
| 4. REFERRAL LOCATION | INVOICE INSTRUCTIONS | | | | | | |

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| PRICE REFERENCE | SECONDARY REFERENCE/ PART NUMBER | ACCOUNTING | | | DESCRIPTION | QTY. | | UNIT PRICE | | AMOUNT |
|-----------------|-------------------------------------|------------|------|----|-----------------|--------|-----|------------|-----|---------|
| | | LOC | ACCT | DF | | QTY. | U/M | QTY. | U/M | |
| 575 | | 1 | | | MILEAGE #105 | 40 | mi | 4 | 00 | 160 00 |
| 578 | | 1 | | | Pump Service | 1 | eq | 3546 | 00 | 1250 00 |
| 221 | | 1 | | | VCL | 2 | gal | 25 | 00 | 50 00 |
| 281 | | 1 | | | Mud Flush | 500 | ss1 | 75 | | 375 00 |
| 290 | | 1 | | | D-Air | 2 | gal | 8 | 00 | 16 00 |
| 330 | | 2 | | | SMD Cement | 150 | SKS | 10 | 50 | 1575 00 |
| 276 | | 2 | | | Flocele | 38 | lbs | 1 | 00 | 38 00 |
| 581 | | 2 | | | Service Chg CMT | 150 | SKS | 1 | 10 | 165 00 |
| 583 | | 2 | | | Drayscc | 299.56 | Tm | 1 | 00 | 299 56 |

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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 Tie Smith by Dave
 DATE SIGNED 06-19-05 TIME SIGNED 0945
 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 | P6-1 PAGE TOTAL | 3928 56 |
| OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? | | | | P6-3 | 4100 00 |
| WE UNDERSTOOD AND MET YOUR NEEDS? | | | | sub Total | 8028 56 |
| OUR SERVICE WAS PERFORMED WITHOUT DELAY? | | | | Rooks TAX 5.3% | 326 16 |
| WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? | | | | TOTAL | 8354 72 |
| 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 Dave Ash APPROVAL

Thank You!

CONFIDENTIAL

SWIFT Services, Inc.

ORIGINAL

JOB LOG

DATE 06.19.05 PAGE NO. 1

CUSTOMER Amer. Can. Wellser WELL NO. 1-24 LEASE Simon JOB TYPE 5 1/2 Long string TICKET NO. 8026

Table with columns: CHART NO., TIME, RATE (BPM), VOLUME (EBL) (GAL), PUMPS (T, C), PRESSURE (PSI) (TUBING, CASING), DESCRIPTION OF OPERATION AND MATERIALS. Includes handwritten entries for operations like 'ONLOCATION, Discuss Job, Lay down D.P.', 'Start Mud Flush', 'Start VCL Flush', 'Start SMD Cement Mix @ 13.5#/gal', and 'Job Complete'.

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Thank You!
Dnr. Blaine Jason



ADDRESS *AMERICAN WARRIOR # 25*

CITY, STATE, ZIP CODE

No 8449

PAGE 1 OF 1

| | | | | | | | |
|--|--|---|--|----------------------------|---------------------------------|-----------------------|---------------------|
| SERVICE LOCATIONS 1. <i>Hays, Ks.</i> | WELL/PROJECT NO. <i>1-24</i> | LEASE <i>Simmons</i> | COUNTY/PARISH <i>Rooks</i> | STATE <i>Ks</i> | CITY | DATE <i>7-5-05</i> | OWNER <i>Sam</i> |
| 2. <i>Ness City, Ks.</i> | TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES | CONTRACTOR <i>Express Well Service</i> | RIG NAME/NO. | SHIPPED VIA <i>2 ft</i> | DELIVERED TO <i>Location</i> | ORDER NO. | |
| 3. | WELL TYPE <i>oil</i> | WELL CATEGORY <i>Development</i> | JOB PURPOSE <i>celest Port Collar</i> | WELL PERMIT NO. | WELL LOCATION | | |
| 4. | REFERRAL LOCATION | INVOICE INSTRUCTIONS | | | | | |

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| PRICE REFERENCE | SECONDARY REFERENCE/ PART NUMBER | ACCOUNTING | | | DESCRIPTION | QTY. | U/M | QTY. | U/M | UNIT PRICE | AMOUNT |
|-----------------|-------------------------------------|------------|------|----|--------------------------------|---------------|-------------|------|-----|----------------|----------------|
| | | LOC | ACCT | DF | | | | | | | |
| <i>575</i> | | <i>1</i> | | | <i>MILEAGE #103</i> | <i>50</i> | <i>mi</i> | | | <i>4.00</i> | <i>200.00</i> |
| <i>578</i> | | <i>1</i> | | | <i>Pump Charge Port Collar</i> | <i>1</i> | <i>rod</i> | | | <i>1250.00</i> | <i>1250.00</i> |
| <i>288</i> | | <i>1</i> | | | <i>Brady Sand 20/40</i> | <i>1</i> | <i>skt</i> | | | <i>14.00</i> | <i>14.00</i> |
| <i>330</i> | | <i>2</i> | | | <i>SMD Cement</i> | <i>110</i> | <i>skts</i> | | | <i>10.50</i> | <i>1155.00</i> |
| <i>276</i> | | <i>2</i> | | | <i>Flacole</i> | <i>38</i> | <i>#</i> | | | <i>1.00</i> | <i>38.00</i> |
| <i>581</i> | | <i>2</i> | | | <i>Cement Service Charge</i> | <i>150</i> | <i>wks</i> | | | <i>1.10</i> | <i>165.00</i> |
| <i>583</i> | | <i>2</i> | | | <i>Drayage</i> | <i>367.55</i> | <i>TAM</i> | | | <i>1.00</i> | <i>367.55</i> |

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

By Nick

X *Joe Smith*

DATE SIGNED *7-5-05* TIME SIGNED *1445* 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 *3189.55*

Rooks
TAX *5.3%*

TOTAL *3253.52*

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!

JOB LOG

CONFIDENTIAL

SWIFT Services, Inc.

ORIGINAL

DATE 7-5-05 PAGE NO. 7

CUSTOMER American Warrior Inc WELL NO. 1-24 LEASE Simmons JOB TYPE cement Port Cellar TICKET NO. 8449

| CHART NO. | TIME | RATE (BPM) | VOLUME (BBL) (GAL) | PUMPS | | PRESSURE (PSI) | | DESCRIPTION OF OPERATION AND MATERIALS |
|-----------|------|------------|--------------------|-------|---|----------------|--------|--|
| | | | | T | C | TUBING | CASING | |
| | 1000 | | | | | | | KCC on loc w/ tool AUG 1 2005 |
| | | | | | | | | CONFIDENTIAL start tools in hole set RBP @ 2750' |
| | 1155 | 3 | 0 | | | 250 | | circ hole |
| | 1210 | | 65 | | | | | hole clean |
| | 1215 | | | | | 800 | | test tools + csg to 800 ^{psi} |
| | 1220 | 2 | 0 | | | 150 | | spot sand @ 2720' |
| | 1225 | | 10 | | | | | shut down |
| | | | | | | | | pull to P.C. locate P.C. |
| | 1305 | 2.5 | 3 | | | 300 | | Open P.C. take inj rate |
| | 1315 | 4 | 0 | | | 400 | | start cement 110sks SMD |
| | 1330 | 2 | 55/0 | | | 300 | | end cement / start disp |
| | 1332 | | 5 | | | | | cement displaced |
| | | | | | | | | close P.C. |
| | 1335 | | | | | 800 | | Test csg, to 800 ^{psi} |
| | 1340 | | | | | | | rev out with 13 bbl wtr run down to RBP |
| | 1405 | 3 | 0 | | | 250 | | circ sand off plug |
| | 1405 | | 25 | | | | | hole clean |

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Thank you
Nick Dan & Brett

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

KCC
AUG 11 2005

SERVICE POINT: Russell

ORIGINAL

CONFIDENTIAL

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| | | | | | | | |
|--------------------------------|-------------------|--|---------------------|---------------------------|-----------------------------|---------------------------|----------------------------|
| DATE <u>6/13/05</u> | SEC <u>24</u> | FWP <u>19</u> | RANGE <u>19</u> | CALLED OUT <u>7:00 pm</u> | ON LOCATION <u>11:30 pm</u> | JOB START <u>11:45 pm</u> | JOB FINISH <u>12:15 am</u> |
| LEASE <u>Simon</u> | WELL# <u>1-24</u> | LOCATION <u>Plainville 4 w 1 N 1 w</u> | COUNTY <u>Rooks</u> | STATE <u>Kr.</u> | | | |
| OLD OR <u>NEW</u> (Circle one) | | | <u>1/2 N E into</u> | | | | |

CONTRACTOR American Eagle Drilling OWNER _____

TYPE OF JOB Surface Sol

HOLE SIZE 10 3/4 T.D. 225

CASING SIZE 8 5/8 20lb DEPTH 219

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 13 bbl

EQUIPMENT

PUMP TRUCK CEMENTER Shane

366 HELPER Bill

BULK TRUCK

222 DRIVER Fred

BULK TRUCK

_____ DRIVER _____

REMARKS:

Great Pipe

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.

Thanks

SIGNATURE

Don Anderson

CEMENT AMOUNT ORDERED 150 Con 370cc 2% Gel

COMMON 150 @ 8⁷⁰ 1305⁰⁰

POZMIX _____ @ _____

GEL 3 @ 14⁰⁰ 42⁰⁰

CHLORIDE 5 @ 38⁰⁰ 190⁰⁰

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING 158 @ 1⁶⁰ 252⁰⁰

MILEAGE 68/sk/mile 492⁹⁶

TOTAL 2282⁷⁶

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 670⁰⁰

EXTRA FOOTAGE _____ @ _____

MILEAGE 52 @ 5⁰⁰ 260⁰⁰

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL 930⁰⁰

PLUG & FLOAT EQUIPMENT

MANIFOLD _____ @ _____

8 1/2 Wood Plug @ _____ 55⁰⁰

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL 55⁰⁰

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

Don Anderson

PRINTED NAME