

CONFIDENTIAL

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 Ks. 67846
Purchaser: NCRA
Operator Contact Person: Jody Smith
Phone: (620) 272-1023
Contractor: Name: Discovery Drilling Co. Inc.
License: 31548
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. _____

7/12/05 7/16/05 8/18/05
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15: 163-23461 - 00 - 00
County: Rooks
C NW SW SE Sec. 32 Twp. 9 S. R. 20 East West
990 800 feet from (S) / N (circle one) Line of Section
2300 2250 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Kuehnl Well #: 1-32
Field Name: Cooper
Producing Formation: Arbuckle
Elevation: Ground: 2236' Kelly Bushing: 2244'
Total Depth: 3950' Plug Back Total Depth: 3901'
Amount of Surface Pipe Set and Cemented at 222' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1746' Feet
If Alternate II completion, cement circulated from 1746'
feet depth to surface w/ 165 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 11,000 ppm Fluid volume 80 bbls
Dewatering method used Hauled off location.
Location of fluid disposal if hauled offsite:
Operator Name: American Warrior Inc.
Lease Name: Renner License No.: 4058
Quarter NW Sec. 5 Twp. 10 S. R. 20 East West
County: Rooks Docket No.: D-26,155

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: 9/20/05

Subscribed and sworn to before me this 20th day of SEPTEMBER, 2005.

Notary Public: Erica Kuhlmeier
Date Commission Expires: 09/12/09



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

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Operator Name: American Warrior Inc. Lease Name: Kuehnl Well #: 1-32
 Sec. 32 Twp. 9 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" 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	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anh	1752'	+492
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	B/Anh	1795'	+448
List All E. Logs Run:		Topeka	3281'	-1037
		Heebner	3482'	-1238
		Toronto	3502'	-1258
		Lansing	3520'	-1276
		B/KC	3742'	-1498
		Arbuckle	3815'	-1571

Porosity, Induction, Sonic, Micro and bond.

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	20#	222'	Common	150	2%gel,3%CC
Production	77/8"	51/2	15.5#	3947'	EA/2	150	

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				

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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
4	3815' to 3820'	None	
4	3836' to 3840'	3000 gal 15% FE	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		23/8	3898'			
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	NA	NA	NA		

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) _____

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

TICKET No 8456

PAGE 1 OF 2

SERVICE LOCATIONS 1. <u>HAYS KS</u>	WELL/PROJECT NO. <u>132</u>	LEASE <u>Kuehnel</u>	COUNTY/PARISH <u>Rooks</u>	STATE <u>KS</u>	CITY	DATE <u>07-17-05</u>	OWNER
2. <u>Ness City KS</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <u>Discovery Drills #1</u>	SHIPPED VIA <u>OT</u>	DELIVERED TO <u>25 1/4 W. Ninto Paloo 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>15-163-23461-00-00</u>	WELL LOCATION <u>S32, T9, R20W</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
575		/			MILEAGE #105	40	mi			4.00	160	00
578		/			Pump Service	1	eq	3951	FT	1250.00	1250	00
221		/			VCL	2	ssl			25.00	50	00
281		/			MUD FLUSH	500	ssl			.75	375	00
290		/			D-A-r	2	ssl			8.00	16	00
402		/			Centralizers	8	eq	5 1/2	in	55.00	440	00
403		/			Bitset	1	eq			155.00	155	00
404	RECEIVED	/			Port Collar # 040783	1	eq			1800.00	1800	00
406	SEP 21 2005	/			Latch Down Plug & Bitset	1	eq			200.00	200	00
407	KCC WICHITA	/			Insert Floot Shoe w/ Auto Fill	1	eq			230.00	230	00
419		/			Rotating Head Rental	1	eq			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 07-17-05 TIME SIGNED 0900 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	Pg 1 PAGE TOTAL	4876	00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				Pg 2	2336	16
WE UNDERSTOOD AND MET YOUR NEEDS?				sub Total	7212	16
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				Rooks TAX 5.3%	282	17
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?						
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	7494	33
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						



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

TICKET CONTINUATION

TICKET No. 8456

CUSTOMER *American Warner* WELL *1-32 Kehnel* DATE *07-17-25* PAGE *2* OF *2*

PRICE REFERENCE	SECONDARY REFERENCE/PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		UM		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF			QTY	UM	QTY	UM			
325		2				Standard CMT	150	Sks			8 25	1237	50
276		2				Flocele	38	Lbs			1 00	38	00
283		2				Salt	750	Lbs			17	127	50
284		2				Cal-Seal	7	Sks			30 00	210	00
285		2				CFR	70	Lbs			3 50	245	00
581		2				Service Chg CMT	150	Sks			1 10	165	00
583		2				Dray age	313.16	Tm			1 00	313	16

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SERVICE CHARGE CUBIC FEET MILEAGE CHARGE TOTAL WEIGHT LOADED MILES TON MILES

CONTINUATION TOTAL **2,336.16**

JOB LOG

SWIFT Services, Inc.

DATE 07/17/05 PAGE NO. 1

CUSTOMER: *American Warrior* WELL NO. *1-32* LEASE *Kuehne 1* JOB TYPE *3 1/2 Long String* TICKET NO. *8456*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBU) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0400							ONLOCATION, Discuss Job TO 3950, Set Pipe @ 3947, SJ 42, Ins. at 3905 PC on top 53, 1750 FT Latch Down Plug Cont, 1, 3, 5, 7, 9, 11, 13, 51 Basket 52 150SKS EA-2 CMT Laying Down Kelly, mt.
	0515							Start CSG a Floater EQU Drop Ball, Hookup, Break Circ., Rotate Pipe
	0735		3/2		✓			Plug RHA MH
	0740		0		✓			MUD FLUSH
			12		✓			HCL FLUSH
			30		✓			End Flushes
	0750	5.5	0		✓		300	Start mixing CMT
			36		✓			End CMT
	0756							WASH PL, Drop Latch Down Plug
	0800	6.0	0		✓		200	Start Dip
			20		✓		200	
			40		✓		200	
		6.0	56		✓		300	
			70		✓		500	Catch CMT Stop Rotating pipe
			80		✓		600	
			88.0		✓		700	
	0820	4.5	92.7		✓		1400	Land Plug Release, Floater Plug Holds
								WASHUP Rackup Tickets Job Complete
	0900							

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Thank You!
Dave, Blaine, Rob



CHARGE TO:
AMANDA WARDOR DDC
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET No 8858

PAGE 1 OF 1

SERVICE LOCATIONS 1. <u>NESS CITY, KS</u>	WELL/PROJECT NO. <u>1-32</u>	LEASE <u>KUCHEL</u>	COUNTY/PARISH <u>ROOKS</u>	STATE <u>KS</u>	CITY	DATE <u>7-25-05</u>	OWNER <u>SAME</u>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>KC WELL SERVICE</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.	
3.	WELL TYPE <u>OIL</u>	WELL CATEGORY <u>DEVELOPMENT</u>	JOB PURPOSE <u>CSMT PORT COLLAR</u>	WELL PERMIT NO.	WELL LOCATION <u>PALCO, KS - 2S, 1/2 W, N 20W</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE		AMOUNT
		LOC	ACCT	DF								
575		1			MILEAGE * 104	40	MC			4.00		160.00
577		1			PUMP SERVICE	1	JOB			800.00		800.00
105		1			PORT COLLAR OPENING TOOL	1	JOB			400.00		400.00
330		1			SWIFT MULTI-DENSITY STRAP	165	SXS			10.50		1732.50
276		1			FLOCCLE	44	URS			1.00		44.00
581		1			SERVICE CHARGE COMPT	175	SXS			1.10		192.50
583		1			DRACAGE	17384	URS	347.68	TM	1.00		347.68

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

x [Signature]
 DATE SIGNED 7-25-05 TIME SIGNED 0900 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	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					3676.68
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				TOTAL	3792.03

Rook's TAX 5.3% 115.35

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

SWIFT OPERATOR Wayne Wilson APPROVAL _____

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 7-25-05 PAGE NO. 7

CUSTOMER AMERICAN WARRIOR DJC WELL NO. 1-32 LEASE KUCHEL JOB TYPE CEMENT PORT COLLAR TICKET NO. 8858

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0730							ON LOCATION
	0745							SMOOT TOOL DJ WELL
								2 3/8 x 5 1/2
								PORT COLLAR = 1746'
	0930						1000	PRE TEST - HELD
	0935	3	3				350	OPEN PORT COLLAR - DJT RATE
	0937	4 1/2	91				400	MIX CEMENT - 165 SLS SMD
	0955	3	6				500	DISPLACE CEMENT
								CONCRETE 10 SLS CEMENT TO POT
	1005						1000	CLOSE PORT COLLAR - PRE TEST
	1020	3	20				350	RUN 4 JTS - CONCRETE CEMENT
								WASH UP
	1100							JOB COMPLETE

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THANK YOU
 WAKJE, DUSTY SHADE

ALLIED CEMENTING CO., INC.

21521

Federal Tax I.D.

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

SERVICE POINT: Russell

DATE <u>7/20/05</u>	SEC <u>32</u>	TWP. <u>9</u>	RANGE <u>20</u>	CALLED OUT <u>10:00 AM</u>	ON LOCATION <u>Now</u>	JOB START	JOB FINISH <u>1:00 PM</u>
LEASE <u>Kitchell</u>	WELL # <u>1-32</u>	LOCATION <u>Palco 2 SW</u>	COUNTY <u>Woods</u>	STATE <u>Ks</u>			
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Discovery OWNER _____
 TYPE OF JOB Surfacer
 HOLE SIZE 12 1/4 T.D. 223
 CASING SIZE 8 3/4 DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 13 bbls
EQUIPMENT
 PUMP TRUCK CEMENTER Bill
 # 177 HELPER Brent
 BULK TRUCK _____
 # 362 DRIVER Rogon
 BULK TRUCK _____
 # _____ DRIVER _____

CEMENT **KCC**
 AMOUNT ORDERED 150 bbls Cem. 3-2 **SEP 20 2005**
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 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

REMARKS:
PAUSE Jts of 8' net 222
Cement up 150 bbls
pump plug up 13 bbls of water
Cement did Circ

CHARGE TO: American Workman
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL _____
SERVICE
 DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

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.

PLUG & FLOAT EQUIPMENT
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____
 TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME _____

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