

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING APPLICATION**
Please TYPE Form and File ONE Copy

Form CP-1
September 2003
This Form must be Typed
Form must be Signed
All blanks must be Filled

API # 15 - 025-21,462 -00-00 (Identifier Number of this well). This must be listed for wells drilled since 1967; if no API # was issued, indicate original spud or completion date 8-26-08

Well Operator: American Warrior, Inc. KCC License #: 4058
(Owner / Company Name) (Operator's)
Address: P. O. Box 399 City: Garden City
State: Kansas Zip Code: 67846 Contact Phone: (620) 275 - 2963
Lease: Esplund Well #: 4-30 Sec. 30 Twp. 30 S. R. 23 East West
NW - NE - SE - NE Spot Location / QQQQ County: CLARK

1440 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)
310 010 Feet (in exact footage) From East / West (from nearest outside section corner) Line of Section (Not Lease Line)

Check One: Oil Well Gas Well D&A Cathodic Water Supply Well
 SWD Docket # _____ ENHR Docket # _____ Other: _____

Conductor Casing Size: 8-5/8" Set at: 659' Cemented with: 225 Sacks
Surface Casing Size: N/A Set at: _____ Cemented with: _____ Sacks
Production Casing Size: N/A Set at: _____ Cemented with: _____ Sacks

List (ALL) Perforations and Bridgeplug Sets: As per KCC

Elevation: 2482 (G.L. / K.B.) T.D.: 5 4400' PBTD: N/A Anhydrite Depth: N/A
(Stone Corral Formation)

Condition of Well: Good Poor Casing Leak Junk in Hole

Proposed Method of Plugging (attach a separate page if additional space is needed): Mix Plug @1500' 50SKS, Mix Plug @700' 50SKS, Mix Plug @330' 50SKS, Mix Plug @60' 20 SKS AS PER DIST ONE INSTRUCTIONS

Is Well Log attached to this application as required? Yes No Is ACO-1 filed? Yes No
If not explain why? _____
**RECEIVED
KANSAS CORPORATION COMMISSION
DEC 02 2008
CONSERVATION DIVISION
WICHITA KS**

Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission.

List Name of Company Representative authorized to be in charge of plugging operations: Kevin Wiles, Sr.
Phone: (620) 275 - 2963
Address: P.O. Box 399 City / State: Garden City, KS 67846
Plugging Contractor: Allied Cementing Co., Inc. KCC License #: N/A
(Company Name) (Contractor's)
Address: P. O. Box 31, Russell, KS 67665 Phone: (785) 483 - 3887

Proposed Date and Hour of Plugging (if known?): 9-4-08 10:00pm

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent
Date: 11-17-08 Authorized Operator / Agent: _____
(Signature)

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

**Well plugged - KCC - PKT*

*DIST 1
PKT*