

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: Scott Corsair
Phone: (785) 398-2270
Contractor: Name: Discovery Drilling
License: 31548
Wellsite Geologist: Scott Corsair

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. _____

<u>12-10-99</u>	<u>12-17-99</u>	<u>12-18-99</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 135-24,091-0000
County: Ness
NW SWNW NE Sec. 34 Twp. 18 S. R. 21 East West
750 feet from S (N) (circle one) Line of Section
2400 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Price Well #: 11
Field Name: Ryersee
Producing Formation: Mississippian
Elevation: Ground: 2176 Kelly Bushing: 2184
Total Depth: 4227 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 222 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1385 Feet
If Alternate completion, cement circulated from 1385
feet depth to surface w/ 140 sx cnt.
Drilling Fluid Management Plan Alt II KGR 1/8/08
(Data must be collected from the Reserve Pit)
Chloride content 3,000 ppm Fluid volume 400 bbls
Dehydrating 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.: _____

CONSERVATION DIVISION

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: Petroleum Engineer Date: 4-11-01
Subscribed and sworn to before me this 11th day of April
2001
Notary Public: Bernice Moore
Date Commission Expires: 2/7/02

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

NOTARY PUBLIC - State of Kansas
BERNICE MOORE
My Appt. Exp. 2/7/02

Operator Name: American Warrior, Inc. Lease Name: Price Well #: 11
 Sec. 34 Twp. 18 S. R. 21 East West County: Ness

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	Anhydrite	1387	+797
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Chase	2253	-69
List All E. Logs Run:	Dual Induction, Dual Compensated Porosity	Topeka	3313	-1129
		Heebner	3625	-1441
		Lansing	3668	-1484
		Base Kansas City	3973	-1789
		Marmaton	3994	-1810
		Pawnee	4059	-1902
		Ft. Scott	4136	-1952
		Cheorkee Shale	4151	-1967
		Mississippian Osage	4224	-2040
		Total Depth	4228	-2044

CASING RECORD <input type="checkbox"/> New <input checked="" 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. / FL	Setting Depth	Type of Cement	# Sacs Used	Type and Percent Additives
Surface Pipe	12 1/4	8 5/8	20	222	60/40 POZ	150	2%gel & 3%cc
Production	7 7/8	5 1/2	14	4226	SMDC	110	gas stop & flocele

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	surface/1385	SMDC	140	Flocele

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

TUBING RECORD		Size 2 7/8	Set At 4225'	Packer At None	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 01-20-00		Producing Method <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. 15	Gas Mcf 0	Water Bbls. 250	Gas-Oil Ratio	Gravity 39

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 4227-4228
 (If vented, Sumit ACO-18.) Other (Specify) _____



CHARGE TO: *American Warrior*
 ADDRESS:
 CITY, STATE, ZIP CODE: *Ness City, KS*

TICKET No 1865

PAGE 1 OF 1

1. SERVICE LOCATIONS <i>12000023</i>	WELL/PROJECT NO. <i>11</i>	LEASE <i>Price</i>	COUNTY/PARISH <i>Ness</i>	STATE <i>KS</i>	CITY	DATE <i>12-10-99</i>	OWNER <i>Samp</i>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <i>Discovery</i>	SHIPPED VIA <i>104</i>	DELIVERED TO <i>E BAZINP</i>	ORDER NO.	
3.	WELL TYPE <i>OIL</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Surface</i>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>575</i>					MILEAGE	<i>20</i>	<i>mi</i>				<i>40.00</i>
<i>576</i>					Pump Charge	<i>1 EA</i>	<i>221 FT</i>				<i>450.00</i>
<i>40</i>					TOP PLUG	<i>1 EA</i>	<i>2 1/2 IN</i>				<i>56.00</i>
<i>326</i>					60/40 POZ 2% Gel	<i>150</i>	<i>SKS</i>			<i>5.00</i>	<i>750.00</i>
<i>278</i>					Calcium Chloride	<i>4</i>	<i>SKS</i>				<i>100.00</i>
<i>531</i>					BULK SERVICE CHARGE	<i>150</i>					<i>150.00</i>
<i>532</i>					DRAYAGE	<i>min.</i>					<i>100.00</i>

ORIGINAL

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

DATE SIGNED: *12-10-99* TIME SIGNED: *3:00* 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 checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL

TAX

TOTAL

646.00

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

SWIFT OPERATOR: *[Signature]*

APPROVAL

Thank You!



CHARGE TO: American Warrior
 ADDRESS: P.O. Box 399
 CITY, STATE, ZIP CODE: Garden City, Ks

TICKET No 1816

PAGE 1 OF

SERVICE LOCATIONS: 1. Ness City, Ks
 WELL/PROJECT NO.: #11
 LEASE: Price
 COUNTY/PARISH: Ness
 STATE: K
 CITY: Ness City, Ks
 DATE: 12-17-99
 OWNER: Sue
 TICKET TYPE: SERVICE SALES
 CONTRACTOR: Discoveries Drilling Co. Inc.
 RIG NAME/NO.:
 SHIPPED VIA:
 DELIVERED TO: S/E of Bazzone, Ks
 ORDER NO.:
 WELL TYPE: Oil
 WELL CATEGORY: Development
 JOB PURPOSE: New well - Long string
 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	20	mi			2.00	40.00
278		1			Pump Service	1	hr			1200.00	1200.00
281		1			Mud flush	500	gal			5.00	2500.00
281		1			Liquid KCL	2	gal			19.00	38.00
407		1			Insert Flat shoe w/Auto Fill	1	pc	5/2	in	200.00	200.00
406		1			Latch down plug & bottle	1	pc	5/2	in	200.00	200.00
402		1			Centralizers	5	pc	1/2	in	40.00	200.00
403		1			Cement Basket	2	pc	1/2	in	110.00	220.00
404		1			Port Collar	1	pc	5/2	in	1300.00	1300.00
		1			From Continuation Page						1709.00

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

X
 DATE SIGNED: 12-17-99
 TIME SIGNED: 6:00
 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	5357.00
TAX	
TOTAL	

ORIGINAL

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

SWIFT OPERATOR: [Signature]

APPROVAL

Thank You!



CHARGE TO: *American Warriors*
 ADDRESS: *P.O. Box 399*
 CITY, STATE, ZIP CODE: *Garden City, Ks.*

TICKET No 1842

PAGE 1 OF 1

SERVICE LOCATIONS 1. <i>Ness City, Ks.</i>	WELL/PROJECT NO. <i>"11"</i>	LEASE <i>Price</i>	COUNTY/PARISH <i>Ness</i>	STATE <i>Ks.</i>	CITY	DATE <i>1-12-00</i>	OWNER <i>Same</i>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>Plain Well Service</i>	RIG NAME/NO.	SHIPPED <i>WTS</i>	DELIVERED TO <i>E+S of Brink</i>	ORDER NO.	
3.	WELL TYPE <i>Oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cont. Post Collar</i>	WELL PERMIT NO.	WELL LOCATION		
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 "103"	20	mil			2	20
576		1			Pump Service	1	hr			1,200	1,200
104		1			Post Collar Opening Tool	1	pc			250	250
581		1			Service Charge	140	sp			1	140
583		1			Drainage	140	ten mils			75	105
330		1			SMDC	140	sp			9	1,330
276		1			Flood	35	4			190	31

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

X

DATE SIGNED _____ TIME SIGNED _____ 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	3096	50
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				TAX	ORIGINAL	
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			TOTAL		
<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 *[Signature]*

APPROVAL _____

Thank You!

JOB LOG

SWIFT Services, Inc. ORIGINAL

DATE 7-12-00 PAGE NO. 7

CUSTOMER *American Water* WELL NO. *11* LEASE *Pice* JOB TYPE *Case Port Celler* TICKET NO. *1842*

CHART NO.	TIME	RATE (BPM)	VOLUME (BB) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	09:45							on loc set up pack
	10:15							Open Port Celler @ 1385'
								Circulate thru Bridger head
		2				350		2BPM 350psi
	10:20	4				400		Start mixing 140 lb SMD
	10:45							67" pumped Cement to surface
			77					Increase slurry weight
			4 1/2					Finished mixing Displace 4 1/2"
								Finished Displ.
						1,100		Close Port Celler press to 1100psi
								Run 3 Joints tubing
								Reverse out short wing
	11:00							Hole clean
								wash up truss
								Pull opening tool out of hole
								Pack up
	11:30							Job complete

*11:00 11:30
Ray*