

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: _____
Operator Contact Person: Jody Smith
Phone: (620) 272-1023
Contractor: Name: Duke Drilling Co. Inc.
License: 5929
Wellsite Geologist: Steven P. Murphy

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. _____

<u>1/20/05</u>	<u>1/27/05</u>	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 077-21505-00-00
County: Harper
6 NE NE Sec. 11 Twp. 31 S. R. 8 East West
550' feet from S N (circle one) Line of Section
630' feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Banta Well #: #1-11
Field Name: Spivey-Grabs-Basil

Producing Formation: _____
Elevation: Ground: 1649' Kelly Bushing: 1657'
Total Depth: 4850' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 255 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) P+A KJR 3/3/08
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
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: 2/11/05
Subscribed and sworn to before me this 11th day of Feb
20 05
Notary Public: [Signature]
Date Commission Expires: 11/11/07

DEBRA J. PURCELL
Notary Public - State of Kansas
My Appt. Expires 11/11/07

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received **RECEIVED**
 Geologist Report Received **FEB 14 2005**
 UIC Distribution
KCC WICHITA

Operator Name: American Warrior Inc. Lease Name: Banta Well #: #1-11
 Sec. 11 Twp. 31 S. R. 8 East West County: Harper

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Topeka	2958'	-1304
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	3404'	-1750
List All E. Logs Run:		Lansing	3677'	-2023
		KC	3904'	-2250
		Stark	4057'	-2403
		B/KC	4160'	-2506
		Cherokee	4299'	-2645
		Mississippian	4415'	-2761

Dual Compensated Porosity Log, Dual Induction log.

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	24#	255'	60/40Pos	215	3%cc,2%gel

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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i>
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other *(Specify)* Plugged

Production Interval

RECEIVED

FEB 14 2005

KCC WICHITA

ALLIED CEMENTING CO., INC. 17763

Federal Tax I.D.

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

SERVICE POINT:
Medicine LOG

DATE <u>1-28-05</u>	SEC <u>11</u>	TWP <u>31S</u>	RANGE <u>8W</u>	CALLED OUT <u>8:00 AM</u>	ON LOCATION <u>11:20 AM</u>	JOB START <u>12:45 PM</u>	JOB FINISH <u>2:30 P.M.</u>
LEASE <u>Banta</u>	WELL # <u>1-11</u>	LOCATION <u>Mag Plant 4E 1/8S</u>			COUNTY <u>Harper</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)				<u>W/INTO</u>			

CONTRACTOR Duke #2
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 7/8 T.D. 1300
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 1300
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT Fresh Water

EQUIPMENT

PUMP TRUCK CEMENTER David W.
 # 343 HELPER Bill M.
 BULK TRUCK
 # 242 DRIVER David F.
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

1st Plug at 1300 FT Pump 20 BBLs.
Water Mix 35% cement Displace
w/10 BBLs Water 2nd Plug at 700 FT
Pump 15 BBLs Water Mix 35% cement
Displace w/5 BBLs Water 3rd Plug at
300 FT Mix 35% cement Displace w/2 BBLs
Water at 100 FT Mix 25% Ret 20% x
Misc 10% Washup Rig Down.

CHARGE TO: American Warrior
 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.

SIGNATURE [Signature]

OWNER American Warrior
 CEMENT
 AMOUNT ORDERED 1555x 60:40:4%
Gel

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
RECEIVED @ _____
FEB 14 2005 @ _____
KCC WICHITA @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

SERVICE

DEPTH OF JOB 1300
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 _____ @ _____
 _____ @ _____

PLUG & FLOAT EQUIPMENT

MANIFOLD _____ @ _____
1-8 5/8 Dry 16/16 Plug @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]
 PRINTED NAME _____

ALLIED CEMENTING CO., INC. 17757

Federal Tax I.D. _____

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

SERVICE POINT:
Medicine Lake

DATE <u>1-20-05</u>	SEC. <u>11</u>	TWP. <u>31S</u>	RANGE <u>8W</u>	CALLED OUT <u>5:30 AM.</u>	ON LOCATION <u>7:30 PM.</u>	JOB START <u>9:00 PM.</u>	JOB FINISH <u>9:30 PM.</u>
LEASE <u>Banta</u>		WELL# <u>1-11</u>	LOCATION <u>Mag Plant</u>		COUNTY <u>Harper</u>	STATE <u>KS.</u>	
OLD OR NEW (Circle one)			<u>HE 1/85 WINTA</u>				

CONTRACTOR DUK-#2

TYPE OF JOB Surface

HOLE SIZE 12 1/2 T.D. 255

CASING SIZE 8 5/8 DEPTH 255

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 200 PSI MINIMUM _____

MEAS. LINE _____ SHOE JOINT 15 FT

CEMENT LEFT IN CSG. 15 FT

PERFS. _____

DISPLACEMENT FRESH WATER 15 BBL/S

OWNER American Water

CEMENT

AMOUNT ORDERED 215 SY 60:40:2+

3% CI

EQUIPMENT

PUMP TRUCK CEMENTER David W.

302 HELPER Dwayne W.

BULK TRUCK

364 DRIVER David F.

BULK TRUCK

_____ DRIVER _____

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

RECEIVED
FEB 14 2005
KCC WICHITA

REMARKS:

Off at bottom break pipe
dump 215 SY 60:40:2+ 3% CI
Relate Plug Displace w/15
BBL's which up on Plug
if top cement D.O.C. is
Rig Down.

TOTAL _____

SERVICE

DEPTH OF JOB 255

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

CHARGE TO: American Water

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

MANIFOLD _____ @ _____

1-Wooden Plug _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

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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.

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME _____