

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4058  
Name: American Warrior, Inc.  
Address: P. O. Box 399  
City/State/Zip: Garden City, KS 67846  
Purchaser: NCRA  
Operator Contact Person: Joe Smith  
Phone: (620) 275-2963  
Contractor: Name: Discovery Drilling Co., Inc.  
License: 31548  
Wellsite Geologist: Steven P. Murphy, PG

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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. \_\_\_\_\_  

2-18-06	2-23-06	3-27-06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23,147-00-00  
County: Graham  
    NW     SE     SW Sec. 35 Twp. 9 S. R. 21  East  West  
1000 FSL feet from (6) / N (circle one) Line of Section  
1840 FW feet from E / (W) (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: DeYoung Well #: 2-35  
Field Name: Cooper  
Producing Formation: Arbuckle  
Elevation: Ground: 2307' Kelly Bushing: 2315'  
Total Depth: 3950' Plug Back Total Depth: 3930'  
Amount of Surface Pipe Set and Cemented at 222.54 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set 1748 Feet  
If Alternate II completion, cement circulated from 1748'  
feet depth to Surface w/ 135 sx cmt.

Drilling Fluid Management Plan AITI NH 6-5-08  
(Data must be collected from the Reserve Pit)  
Chloride content 9,000 ppm Fluid volume 300 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: Compliance Coordinator Date: 4-24-06  
Subscribed and sworn to before me this 24 day of April,  
20 06.  
Notary Public [Signature]  
Date Commission Expires: 09-22-09

ERICA KUHLMEIER  
Notary Public - State of Kansas  
My Appt. Expires 09-22-09

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: DeYoung Well #: 2-35  
 Sec. 35 Twp. 9 S. R. 21  East  West County: Graham

**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 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	1782 +533
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	B. Anhydrite	1816 +499
List All E. Logs Run:		Topeka	3306 -991
		Heebner	3513 -1198
		Lansing	3554 -1239
		BKC	3778 -1463
		Arbuckle	3866 +1551

Dual Induction Log, Dual Compensated Porosity Log, Sonic Cement Bond 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 Pipe	12-1/4"	8-5/8"	23#	222.54	Common	150 sx	3% cc 2% gel
Production Pipe	7-7/8"	5-1/2'	14#	3952'	EA-2	150 sx	

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				

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	3866' to 3868'	3000 gal., 15% FE Acid	Same

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 APR 20 2006  
 CONSERVATION DIVISION  
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TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2-3/8"	3930'	None		
Date of First, Resumerd Production, SWD or Enhr.			Producing Method			
SI			<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	
	N/A	N/A	N/A			

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled  
 (If vented, Submit ACO-18.)  Other (Specify) \_\_\_\_\_



ADDRESS *American Warrior Inc*

CITY, STATE, ZIP CODE

No 9701

PAGE 1 OF 1

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LOCATIONS <i>ks</i>	WELL/PROJECT NO. <i># 2-35</i>	LEASE <i>De Young</i>	COUNTY/PARISH <i>Graham</i>	STATE <i>KS</i>	CITY	DATE <i>3-7-06</i>	OWNER <i>same</i>
<i>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>ct</i>	DELIVERED TO <i>Location</i>	ORDER NO.	
	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cement Port Collar</i>	WELL PERMIT NO.	WELL LOCATION		
WELL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
75		1			MILEAGE #103	50		mi		4.00	200.00
78		1			Pump Charge Port Collar	1	ea	1748'		1250.00	1250.00
30		2			SMD Cement	135		sks		12.00	1620.00
76		2			Floccle	44		#		1.25	55.00
81		2			Cement Service Charge	175		sks			192.50
83		2			Drayage	428.8		T/M			428.80

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 APR 26 2006  
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TERMS: Customer hereby acknowledges and agrees to terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO WORK OR DELIVERY OF GOODS  
*By Nick Karbe*

*Smith*  
 SIGNED 3-7-06 TIME SIGNED 1100  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	3746.30
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?				Graham TAX 5.55%	92.96
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TOTAL	3839.26
<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.

OPERATOR *Nick Karbe* APPROVAL

Thank You!

**JOB LOG**

**SWIFT Services, Inc.**

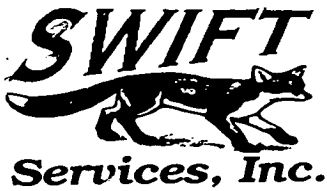
DATE 3-7-06 PAGE NO. 1

CUSTOMER American Warrior Inc WELL NO. #2-35 LEASE DeYoung JOB TYPE Cement Port Collar TICKET NO. 9701

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0900							on loc w/ Tool on loc w/ Trks setup Trks
								5 1/2" x 14" x 1748' P.C. x 2 3/8" tbg
								start Tool in hole
								locate P.C.
	0955						1000	Test Csg
								Open P.C.
	1000	4	3				400	Take inj. rate
	1005	4	0				400	Start Cement 135 sks SMD
		3	69/0				500	End Cement / Start Displacement
	1024		6					Cement Displaced
								Close P.C.
								Test Csg
	1							Run 3jts
	1030	3	0				150	Reverse put
	1035		15					Hole Clean
								135 sks 10 bbl to pit
								Thank you
								Nick, Josh & Rob

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APR 26 2006  
CONSERVATION DIVISION  
WICHITA, KS



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

TICKET No 9666

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PAGE 1 OF 7

SERVICE LOCATIONS: 1. Hays, Ks. 2. Ness City, Ks.

WELL/PROJECT NO. #2-35 LEASE DeYoung COUNTY/PARISH Graham STATE Ks CITY  DATE 2-23-06 OWNER Same

TICKET TYPE  SERVICE  SALES CONTRACTOR Discovery Drlg. #3 RIG NAME/NO.  SHIPPED VIA 2H DELIVERED TO Location ORDER NO.

WELL TYPE oil WELL CATEGORY Development JOB PURPOSE cement logging 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 #103	50	mi			4 <sup>00</sup>	200
578		1			Pump Charge (logging)	1	ea	3956'		1250 <sup>00</sup>	1250
281		1			Mud flush	500	gal			75	375
221		1			KCL liquid	2	gal			26 <sup>00</sup>	52
407		1			Insert Flat Shoe w/fill	1	ea	5 1/2"		250 <sup>00</sup>	250
406		1			L.D. Plug & Baffle	1	ea	" "		210 <sup>00</sup>	210
402		1			centralizers	8	ea	" "		60 <sup>00</sup>	480
403		1			Basket	1	ea	" "		<del>600</del>	
404		1			Part Collar	1	ea	" "		230 <sup>00</sup>	230
419		1			Rotating Head	1	ea	" "		2000 <sup>00</sup>	2000
										250 <sup>00</sup>	250

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 APR 26 2006  
 CONSERVATION DIVISION  
 WICHITA KS

**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 Bah R. Ganche  
 DATE SIGNED 2-23-06 TIME SIGNED 0745  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	AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				5297	
WE UNDERSTOOD AND MET YOUR NEEDS?				page 2	<del>2684</del>
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				subtotal	<del>7933</del>
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Graham TAX	7981
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		5.55%	331
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	8312

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



**JOB LOG**

**SWIFT Services, Inc.**

DATE 2-23-06 PAGE NO.

CUSTOMER American Warrior Inc WELL NO. # 2-35 LEASE De Young #2-35 JOB TYPE Cement Longstring TICKET NO. 9666

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0430							on loc w/ FE
								5 1/2" x 14 # 3956 x 18' 50 cent, 1, 3, 5, 7, 9, 11, 13, 51 Basket 52 Part Collar 52 @ 1751'
	0450							start FE.
	0630							Break circ.
	0645	2	3					Plug R.H.
	0650	4	0			150		Start Pre-flushes 500 gal Mud/Wash 20 bbl KCL flush
	0700	6.5	32/0			250		Start Cement 150 sks EA-2
	0705		33					End Cement Wash P & L Drop Plug
	0709	7	0			150		Start Displacement
	0720	6	75			300		catch cement
	0724		96			400/1300		Land Plug Release Pressure Float Held

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APR 2 8 2006  
CONSERVATION DIVISION  
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Thank you  
Nick, Josh & Brett

# ALLIED CEMENTING CO., INC. 25063

Federal Tax I.D.

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

APR 24 2006

SERVICE POINT:

CONFIDENTIAL

Russell

DATE <u>2/18/06</u>	SEC. <u>35</u>	TWP. <u>9</u>	RANGE <u>21W</u>	CALLED OUT	ON LOCATION <u>3:00pm</u>	JOB START <u>4:00pm</u>	JOB FINISH <u>4:30pm</u>
LEASE <u>DeYong</u>	WELL # <u>2-35</u>	LOCATION <u>Booster Station 15</u>	OLD OR <u>NEW</u> (Circle one)	<u>3 3/4 W Sinto</u>	COUNTY <u>Graham</u>	STATE <u>Ks.</u>	

CONTRACTOR Discovery Drilling Rig #3  
 TYPE OF JOB Surface Job  
 HOLE SIZE 12 1/4 T.D. 223  
 CASING SIZE 8 7/8 23# DEPTH 222.54  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG. 15'  
 PERFS.  
 DISPLACEMENT 13 1/4

OWNER  
 CEMENT  
 AMOUNT ORDERED 150 Com 3% CC  
2% Gel

EQUIPMENT  
 PUMP TRUCK CEMENTER Shane  
 # 398 HELPER Gary  
 BULK TRUCK  
 # 328 DRIVER Jody  
 BULK TRUCK  
 # DRIVER

COMMON 150 @ 9.60 1440.00  
 POZMIX @  
 GEL 3 @ 15.00 45.00  
 CHLORIDE 5 @ 42.00 210.00  
 ASC @

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 APR 26 2006  
 CONSERVATION DIVISION  
 WICHITA, KS

HANDLING 158 @ 1.70 268.60  
 MILEAGE 74/SK/MILE 218.90  
 TOTAL 2682.50

REMARKS:

Cement Circ!

SERVICE

DEPTH OF JOB  
 PUMP TRUCK CHARGE 735.00  
 EXTRA FOOTAGE @  
 MILEAGE 65 @ 5.00 325.00  
 MANIFOLD @  
 @  
 @

CHARGE TO: American Warrior, Inc.  
 STREET  
 CITY STATE ZIP

TOTAL 1060.00

PLUG & FLOAT EQUIPMENT

8 7/8 Wood Plug @ 55.00  
 @  
 @  
 @

TOTAL 55.00

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.

TAX  
 TOTAL CHARGE  
 DISCOUNT IF PAID IN 30 DAYS

Thanks!  
 SIGNATURE John [unclear]

PRINTED NAME