

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: N/A
Operator Contact Person: Kevin Wiles, Sr.
Phone: (620) 275-2963
Contractor: Name: Petromark Drilling Rig #2
License: 33323
Wellsite Geologist: Ron Nelson

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>3-28-06</u>	<u>4-3-06</u>	<u>5-4-06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 009-24,920-00-00
County: Barton
NW NE SW SE Sec. 19 Twp. 20 S. R. 12 East West
1170 FSL feet from S / N (circle one) Line of Section
1840 FEL feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: HADDON-FISCHER Well #: 1-19
Field Name: ROLLING GREEN
Producing Formation: Arbuckle
Elevation: Ground: 1845' Kelly Bushing: 1852'
Total Depth: 3600' Plug Back Total Depth: 3573'
Amount of Surface Pipe Set and Cemented at 312 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 Att 1 Nttle 6-08
(Data must be collected from the Reserve Pit)
Chloride content 11,000 ppm Fluid volume 500 bbls
Dewatering method used Hauled Off Site
Location of fluid disposal if hauled offsite:
Operator Name: American Warrior, Inc.
Lease Name: Lonnon C 3 License No.: 4058
Quarter NE Sec. 36 Twp. 20 S. R. 13 East West
County: Barton Docket No.: E-22,531-0001

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: _____
Title: Compliance Coordinator Date: 5-20-06

Subscribed and sworn to before me this 20th day of May,
20 06.

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

ERICA KUHLMEIER
Notary Public - State of Kansas
My Appt. Expires 09-12-09

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
MAY 22 2006

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Operator Name: American Warrior, Inc. Lease Name: HADDON-FISCHER Well #: 1-19
 Sec. 19 Twp. 20 S. R. 12 East West County: Barton

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Borehole Compensated Sonic Log, Dual
 Compensated Porosity Log, Microresistivity Log,
 Dual Induction Log, Sonic Cement Bond Log,

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Heebner	3065	-1213
Toronto	3080	-1228
Douglas	3098	-1246
Brown Lime	3186	-1334
Lansing	3199	-1347
Base Kansas City	3417	-1565
Conglomerate	3435	-1583
Arbuckle	3502	-1650

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"	20#	312'	Common	300 sx	3% cc 2% gel
Production Pipe	7-7/8"	5-1/2"	14#		SMDC	150 sx	Flocele & CFR-1

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	3330' to 3334'	2000 Gal 15% NE Acid	Same

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TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	3450'	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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 (If vented, Submit ACO-18.) Open Hole Perf. Dually Comp. Commingled Other (Specify) _____



CHARGE TO: American Worman
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET No 9193

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PAGE 1 OF 2

SERVICE LOCATIONS: 1. HAWKS 2. NESSCITY KS

WELL/PROJECT NO.: 1-19 LEASE: Haddon-Fischer COUNTY/PARISH: Benton STATE: KS CITY: DATE: 04-03-06 OWNER:

TICKET TYPE: SERVICE SALES CONTRACTOR: RIG NAME/NO.: Petro mark SHIPPED VIA: C7 DELIVERED TO: 55. 3/4 E. N. W. into Creek Bend ORDER NO.:

WELL TYPE: Oil WELL CATEGORY: Develop JOB PURPOSE: 5/2 Longstring WELL PERMIT NO.: WELL LOCATION: S19, T20, R21W

REFERRAL LOCATION: INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT		
		LOC	ACCT	DF									
575		1			MILEAGE #105	70	m			4.00	280	00	
578		1			Pump Service	1	ea	3600	FT	1250	00	1250	00
221		1			Liquid HCL	2	gal			26	00	52	00
281		1			Mud Flush	500	gal			75	00	375	00
290		1			D.Air	1	gal			32	00	32	00
402		1			Centralizer	6	ea	5 1/2	in	60	00	360	00
403		1			Cmt basket	1	ea	5 1/2	in	230	00	230	00
406		1			Latch Down Plug & Baffle	1	ea	5 1/2	in	210	00	210	00
407		1			Insert Float Shoe & Auto FLV	1	ea	5 1/2	in	250	00	250	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

DATE SIGNED: 04-03-06 TIME SIGNED: 1615
 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?				Pg-1 PAGE TOTAL	3039 00
WE UNDERSTOOD AND MET YOUR NEEDS?				Pg-2	2844 57
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				sub Total	5883 57
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Barton TAX 6.55%	236 45
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	6122 02
<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: Dave Ash APPROVAL:

Thank You!



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

TICKET CONTINUATION

TICKET No. 9193

CUSTOMER **AWZ** WELL **1-19 Haddon-Fischer** DATE **04-03-06** PAGE **2** OF **2**

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY	UNIT	UNIT PRICE	AMOUNT
		LOC	TRACCT	REFS						
325		2				150	SK	9.60	1440.00	
286		2				37	lb	1.25	47.50	
283		2				750	lb	.20	150.00	
284		2				700	SK	30.00	210.00	
285		2				71	lb	4.00	284.00	
581		2				150	SK	1.10	165.00	
583		2				548.07	TM	1.00	548.07	
SERVICE CHARGE						CUBIC FEET				
MILEAGE CHARGE			TOTAL WEIGHT		LOADED MILES		TON MILES			

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CONTINUATION TOTAL **2844.57**

JOB LOG

SWIFT Services, Inc.

DATE 04-03-06 PAGE NO. 7

CUSTOMER AWI WELL NO. 1-19 LEASE Haddon-Fletcher JOB TYPE 5/2 Constricting TICKET NO. 9123

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1615							ONLOCATION Discuss Job, With Jon Welder to Finish 1505UEA-2 CMT 5/2 14" / 14" CS4 TD 3600, TP, SJ 20.98, Invert to Cent. 2.4, 6.8, 12.14. Basketon # 10
	1735							Start CS4 Floct EOU
	1915							Tog Button
	1915							Drop Ball
	1930							Hook up Break Circ.
	2015		3					Plug RH 15545
	2020	5.0	0		✓	200		Start Mud Flush
			12		✓			" HCL Flush
			32		✓			End Flushes
	2028	5.0	0		✓	200		Start EA-2 CMT 13554
			33		✓			end CMT
								Drop Plug
								Wash P.L
	2035	6.0	0		✓	100		Start Disp
		6.0	55.3		✓	200		CMT On bottom
		6.0	70		✓	300		
		6.0	75		✓	450		
		8.0	80		✓	550		Slow Rate Down
	2050	4.0	83.5		✓	150		Lead Plug
	2055							Release psi Floct Hblks
	2100							Wash up
	2115							Packing
	2130							Tri Hblks
	2145							Job Complete

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Thank You!
Dave, Blaine, Brett

ALLIED CEMENTING CO., INC.

24135

Federal Tax I.D.

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

SERVICE POINT:

Great Bend

MAY 20 2006

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DATE <i>3-28-06</i>	SEC. <i>19</i>	TWP. <i>20</i>	RANGE <i>12</i>	CALLED OUT <i>8 AM</i>	ON LOCATION <i>10 AM</i>	JOB START <i>11 AM</i>	JOB FINISH <i>1 PM</i>
LEASE <i>Haddon Fisher</i>	WELL # <i>1-19</i>	LOCATION <i>Great Bend 53 3 1/2 E N 1/2</i>				COUNTY <i>Barton</i>	STATE <i>K.S.</i>
OLD OR NEW (Circle one) <input checked="" type="radio"/> OLD <input type="radio"/> NEW							

CONTRACTOR *Petromark Rig 2*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4* T.D. *312 ft*

CASING SIZE *8 1/2* DEPTH *312 ft*

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. *20 ft*

PERFS. _____

DISPLACEMENT *18 bbl*

OWNER _____

CEMENT AMOUNT ORDERED *300 of Common*

32 cc 22 gal

COMMON	<i>300 net</i>	@	<i>9.60</i>	<i>2880.00</i>
POZMIX	_____	@	_____	_____
GEL	<i>6 gal</i>	@	<i>15.00</i>	<i>90.00</i>
CHLORIDE	<i>9 gal</i>	@	<i>42.00</i>	<i>378.00</i>
ASC	_____	@	_____	_____

EQUIPMENT

PUMP TRUCK # *181* CEMENTER *Mike M.* HELPER *Robert B.*

BULK TRUCK # *342* DRIVER *Steve T.*

BULK TRUCK # *260* DRIVER *Brandon R.*

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HANDLING	<i>315 net</i>	@	<i>1.70</i>	<i>535.50</i>
MILEAGE	<i>315 net</i>	@	<i>9 mi</i>	<i>200.00</i>
TOTAL				<i>4083.50</i>

REMARKS:

*Circulate Hole with Rig mud pump
mix cement + Release plug
Displace Plug Down with water
Cement circulate to surface*

SERVICE

DEPTH OF JOB *312 ft*

PUMP TRUCK CHARGE *735.00*

EXTRA FOOTAGE *12* @ *60* *7.20*

MILEAGE *9* @ *500* *45.00*

MANIFOLD _____ @ _____

TOTAL *787.20*

CHARGE TO: *American Warrior*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

1-8 1/2 Two cup plug @ *55.00* *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.

Thanks we appreciate it!!

SIGNATURE *Don Koch*

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____