

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: N/A
Operator Contact Person: Kevin Wiles, Sr.
Phone: (620) 275-2963
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: A Downing & 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. _____

3-23-06	3-28-06	4-18-06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 009-24,916-00-00
County: Barton
SW - NE - NE Sec. 19 Twp. 20 S. R. 12 East West
950 FNL feet from S N (circle one) Line of Section
1090 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: BATCHMAN Well #: 1-19
Field Name: ROLLING GREEN
Producing Formation: Arbuckle
Elevation: Ground: 1847' Kelly Bushing: 1855'
Total Depth: 3600' Plug Back Total Depth: 3581'
Amount of Surface Pipe Set and Cemented at 317' 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 AH LNH 6-6-08
(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, 2006.

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 **RECEIVED**
 UIC Distribution **MAY 22 2006**

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Operator Name: American Warrior, Inc. Lease Name: BATCHMAN Well #: 1-19 MAY 20 2006
 Sec. 19 Twp. 20 S. R. 12 East West County: Barton **CONFIDENTIAL**

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Topeka	+80	+1174
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	3069	-1215
List All E. Logs Run:		Toronto	3085	-1231
		Douglas	3102	-1248
		Brown Lime	3188	-1334
		Lansing	3204	-1350
		BKC	3420	-1566
		Arbuckle	3450	-1596

Borehole Compensated Sonic Log, Dual
 Compensated Porosity Log, Microresistivity Log,
 Dual Induction 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"	24#	317'	Common	300 sx	3% cc 2% gel
Production Pipe	7-7/8"	5-1/2'	14#	3599'	EA-2	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	3274' to 3278'	2000 Gal 15% NE Acid	Same

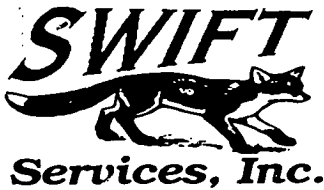
TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	3350'	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
SI		<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> 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 Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

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

Production Interval _____

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CHARGE TO:
AMERON WOODS INC.
 ADDRESS
 CITY, STATE, ZIP CODE

TICKET
 No 10009

PAGE 1 OF 2

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1. SERVICE LOCATIONS <u>NESS CITY KS</u>	WELL/PROJECT NO. <u>1-19</u>	LEASE <u>BATCHMAN</u>	COUNTY/PARISH <u>BARTON</u>	STATE <u>Ks</u>	CITY	DATE <u>3-29-06</u>	OWNER <u>SAME</u>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>DUKE BILG # 8</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>LOCARDJ</u>	ORDER NO.	
3.	WELL TYPE <u>ODL</u>	WELL CATEGORY <u>DEVELOPMENT</u>	JOB PURPOSE <u>5 1/2" LOGS TRDNG</u>	WELL PERMIT NO.	WELL LOCATION <u>Great Bldg, Ks</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M	
575		1			MILEAGE # 104	70	ME		4.00	280.00
578		1			PUMP SERVICE	1	JOB	3600	1250.00	1250.00
221		1			LIQUIDS KCL	2	GAL		26.00	52.00
281		1			MUDFLUSH	500	GAL		.75	375.00
402		1			CENTRALIZERS	6	EA	5 1/2"	60.00	360.00
403		1			COUNT BASKETS	1	EA		230.00	230.00
406		1			LATCH DOWN PLUG - RAFFLE	1	EA		210.00	210.00
407		1			ZUSSET FLOAT SHOE W/ AUTO FOL	1	EA		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

X [Signature]
 DATE SIGNED 3-29-06 TIME SIGNED 1300
 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?				#1	3007.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	2844.57
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				subtotal	5851.57
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE?				Barton 6.5%	236.36
<input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	6087.93
<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 WAVE WISE APPROVAL

Thank You!



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

TICKET CONTINUATION

TICKET No. 10009

CUSTOMER: AMERICAN WARRIOR INC
WELL: BATCHMAN 1-19
DATE: 3-29-06
PAGE: 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			DATE	DESCRIPTION	CUBIC FEET		TON MILES		UNIT PRICE	AMOUNT
		NO.	ACCT.	DE.			OTR	SUM	OTR	SUM		
325		1				STAIRS CMT EA-2	150	S/S			9.60	1440.00
276		1				FLORE	38	LBS			1.25	47.50
283		1				SAC	750	LBS			.20	150.00
284		1				CALCAL	7	S/S	700	LBS	30.00	210.00
285		1				CFR-1	71	LBS			4.00	284.00
581		1				SERVICE CHARGE		CUBIC FEET	150		1.10	165.00
583		1				MILEAGE CHARGE	TOTAL WEIGHT 15659	LOADED MILES 70	TON MILES 548.07		1.00	548.07

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CONTINUATION TOTAL 2847.57

JOB LOG

SWIFT Services, Inc.

DATE **3-29-06** PAGE NO. **7**

CUSTOMER **AMERICAN WARRIOR OIL** WELL NO. **1-19** LEASE **BATCHMAN** JOB TYPE **5 1/2" LONGSTROKE** TICKET NO. **10009**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1230							ON LOCATION
	1345							START 5 1/2" CASING IN WELL
								TO-3600 SET= 3598
								TP-3602 5 1/2" x 14
								ST-18.73
								CENTRALIZER 2, 4, 6, 8, 11, 13
								CUT BSLTS - 9
	1515							DROP BALL - CORUMATE
	1605	6	12		✓		450	PUMP 500 GAL MUD/FUSH
	1607	6	20		✓		450	PUMP 20 BBL KCL-FUSH
	1615		4 1/2					PLUG RH-MH
	1620	5	36		✓		300	MIX CMNT - 150 SLS EA-2 W/ADDS/RES
	1628							WASH OUT PUMP. LOGS
	1630							RELEASE CATCH DOWN PLUG
	1632	6 1/2	0		✓			DISPASE PLUG
		6 1/2	86				850	
	1645	6	87.4				1500	PLUG DOWN - PSZ UP CATCH IN PLUG
	1647						OK	RELEASE PSZ- HELD
								WASH UP TRUCK
	1730							JOB COMPLETE
								THANK YOU
								WARNE, DUSTY, BERTT

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ALLIED CEMENTING CO., INC.

24180

Federal Tax

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

MAY 20 2006

SERVICE POINT:

Great Bend

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DATE 3-24-06	SEC. 19	TWP. 20	RANGE 12W	CALLED OUT 1:00 AM	ON LOCATION 2:30 AM	JOB START 7:30 AM	JOB FINISH 8:30 AM
LEASE Batchman	WELL # 1-19	LOCATION 2814 5 mile Blk top -			COUNTY Barton	STATE KS	
OLD OR <u>NEW</u> (Circle one)		3 east 1 north - 1/2 east south into					

CONTRACTOR Duke #8
 TYPE OF JOB Surface Pipe
 HOLE SIZE 12 1/4 T.D.
 CASING SIZE 8 5/8 DEPTH 317'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. approx 15'
 PERFS.
 DISPLACEMENT 19 1/4 BRIS

OWNER American Warrior Inc

CEMENT
 AMOUNT ORDERED 300 sy Common
390 c/c of 290 gel

EQUIPMENT

PUMP TRUCK CEMENTER Jack
 # 181 HELPER Ricky
 BULK TRUCK
 # 344 DRIVER Steve
 BULK TRUCK
 # DRIVER

COMMON	<u>30004</u>	@	<u>9.60</u>	<u>2880.00</u>
POZMIX		@		
GEL	<u>604</u>	@	<u>15.00</u>	<u>90.00</u>
CHLORIDE	<u>904</u>	@	<u>42.00</u>	<u>378.00</u>
ASC		@		

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HANDLING	<u>315.44</u>	@	<u>1.70</u>	<u>535.50</u>
MILEAGE	<u>315.44</u>	@	<u>9 MW</u>	<u>200.00</u>

TOTAL 4083.50

REMARKS:

Run 7 yds of 8 5/8 csg. Cement with
 300 sy of Cement - Displace plug
 with 1 1/2 Bbls of fresh water -
 Cement did cure - Plug down @
 8:30 am -

Thanks

CHARGE TO: American Warrior Inc

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>317'</u>			
PUMP TRUCK CHARGE				<u>735.00</u>
EXTRA FOOTAGE	<u>17</u>	@	<u>.60</u>	<u>10.20</u>
MILEAGE	<u>9</u>	@	<u>5.00</u>	<u>45.00</u>
MANIFOLD		@		

TOTAL 790.20

PLUG & FLOAT EQUIPMENT

<u>1-8 5/8 Wood</u>	@	<u>55.00</u>	<u>55.00</u>
	@		
	@		
	@		

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

SIGNATURE Steve H. Stephens

SHS

PRINTED NAME