

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 4058
 Name: American Warrior, Inc.
 Address: PO Box 399 90° N & 40' W
 City/State/Zip: Garden City, KS 67846
 Purchaser: NCRA
 Operator Contact Person: Scott Corsair
 Phone: (785) 398-2270
 Contractor: Name: Petromark Drilling, LLC
 License: 33323
 Wellsite Geologist: Scott Corsair
 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>11/17/2006</u>	<u>11/24/2006</u>	<u>03/08/2007</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

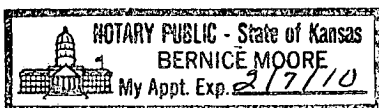
API No. 15 - 135-24565 00-00
 County: Ness
 of N/2 NE SE Sec. 33 Twp. 19 S. R. 21 East West
2400 feet from S N (circle one) Line of Section
700 feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Schwartz-Jordan Well #: 2
 Field Name: Corsair
 Producing Formation: Mississippian
 Elevation: Ground: 2281' Kelly Bushing: 2287'
 Total Depth: 4435 Plug Back Total Depth: NA
 Amount of Surface Pipe Set and Cemented at 211 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set 1570 Feet
 If Alternate II completion, cement circulated from 1570
 feet depth to surface w/ 160 sx cmt.

Drilling Fluid Management Plan AH II NH 7-9-08
(Data must be collected from the Reserve Pit)
 Chloride content 47,000 ppm Fluid volume 745 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: Petroleum Engineer Date: 05/15/2007
 Subscribed and sworn to before me this 15th day of May
 19 2007
 Notary Public: Bernice Moore
 Date Commission Expires: 2/7/10



KCC Office Use ONLY

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

RECEIVED
 KANSAS CORPORATION COMMISSION

MAY 21 2007

CONSERVATION DIVISION
 WICHITA, KS

Operator Name: American Warrior, Inc. Lease Name: Schwartz-Jordan Well #: 2
 Sec. 33 Twp. 19 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 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	Anhydrite	1508	+779
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Chase	2415	-128
List All E. Logs Run:		Heebner	3794	-1507
		Lansing	3840	-1553
		Ft. Scott	4332	-2045
		Cherokee	4349	-2062
		Mississippian	4416	-2129
		TD	4435	-2148

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"	8 5/8"	23	211'	common	160	2% gel, 3% CC
Production	7 7/8"	5 1/2"	15.5	4434'	EA-2	150	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	1570'-surf.	SMD	160	

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	4425.5-4435.5		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8"	4430'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method			
03/08/2007	<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
	40		3	

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	4425.5-4435.5

ALLIED CEMENTING CO., INC.

Federal Tax I.D. #

26512

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

SERVICE POINT:

M.B.

11-14-06

DATE <i>11-17-06</i>	SEC <i>33</i>	TWP. <i>19</i>	RANGE <i>21 W</i>	CALLED OUT <i>2 PM</i>	ON LOCATION <i>10 AM</i>	JOB START <i>1:30 PM</i>	JOB FINISH <i>2:00 PM</i>
LEASE <i>Schwartz Jordan</i>		WELL # <i>2</i>	LOCATION <i>Bazine NE 6 1/4 S W 1/2</i>			COUNTY <i>NE SS</i>	STATE <i>KS</i>
OLD OR NEW (Circle one)							

CONTRACTOR *Petromark Reg #1*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/2* T.D. *215 #*

CASING SIZE *8 5/8* DEPTH *211 #*

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. *15 #*

PERFS. _____

DISPLACEMENT *12 bbl*

EQUIPMENT

OWNER _____

CEMENT AMOUNT ORDERED *160 pk Common*

38cc 2 1/2 gal

COMMON @ _____

POZMIX @ _____

GEL @ _____

CHLORIDE @ _____

ASC @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING @ _____

MILEAGE @ _____

TOTAL _____

PUMP TRUCK CEMENTER *Mike M.*

120 HELPER *Brendon B.*

BULK TRUCK

311 DRIVER *Don D.*

BULK TRUCK

_____ DRIVER _____

REMARKS:

Circulate Hole with mud pump

Mix Cement + Release Plug Down

with water

Cement did Circulate to

Surface

SERVICE

DEPTH OF JOB *211 #*

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

MANIFOLD @ _____

_____ @ _____

TOTAL _____

CHARGE TO: *American Warrior*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

1-8 1/2 Wood on Plug @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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 *David Morgan*

David Morgan

PRINTED NAME

Thank you



CHARGE TO: AMERICAN WARRIOR ZINC
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAY 21 2007

TICKET

No 11178

PAGE 1 OF 2

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. # 2	LEASE SCHWARTZ - JORDAN	COUNTY/PARISH NESS	STATE KS	CITY CONSERVATION DIVISION WICHITA, KS	DATE 11-24-06	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR PENOMASK DRIG. # 1	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LONIZOW	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 5 1/2" LONGSTAGE		WELL PERMIT NO.	WELL LOCATION BAZEL, KS - 3F, 6 1/2 S, WS.	
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE		AMOUNT
		LOC	ACCT	DF								
575		1			MILEAGE # 104	20	MI			4.00		80.00
578		1			PUMP SERVICE	1	JOB	4135	FI	1250.00		1250.00
221		1			LITOMED KCL	2	GAL			26.00		52.00
231		1			MUD FLUSH	500	GAL			75		375.00
402		1			CENTRALIZERS	6	EA	5 1/2"		80.00		480.00
403		1			CEMENT BASKETS	2	EA			280.00		560.00
404		1			PORT COLLAR TOP ST # 68	1	EA	1470	FT	2300.00		2300.00
406		1			WITH DOWN PLUG + BAFFLE	1	EA			235.00		235.00
407		1			INSERT FLOAT SHOE W/AUTO FILL	1	EA			310.00		310.00
419		1			ROTATING HEAD RENTAL	1	JOB			250.00		250.00

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: 11-24-06
 TIME SIGNED: 1700
 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	5892.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	2695.09
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
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: *Wayne Warror*
 APPROVAL: _____

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 11-24-06 PAGE NO. 11

CUSTOMER AMERICAN WOODCOCK ZDC WELL NO. #2 LEASE SCHWARTZ - JORDAN JOB TYPE 5 1/2" LONGSTRING TICKET NO. 11178

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1630							ON LOCATION
	1800							START 5 1/2" CASING 2W WELL
								TD-4435 SFT = 4433
								TD-4437 5 1/2" / FT 15.5
								SJ-42.57
								CONTRACTORS - 1, 3, 4, 5, 6, 67
								OMT BSPTS - 6, 68
								PORT COLLAR = 1470 TOP JT # 68
	2015							DROP BALL - CIRCULATE ROTATE
	2105	6	12		✓		500	PUMP 500 GAL MUDFLUSH "
	2107	6	20		✓		500	PUMP 20 BBLs KCL-FLUSH "
	2112		4					PLUG RH
	2114	6	36		✓		350	MIX COMBT 150 SLS SA-2 = 15.5 PPG "
	2122							WASH OUT PUMP, LEJES
	2124							RELEASE LATCH DOWN PLUG
	2125	7	0		✓			DISPLACE PLUG "
		6 1/2	94				800	SHUT OFF ROTATING
	2140	6 1/2	104.6				1500	PLUG DOWN - PSI UP LATCH DOWN PLUG
	2142						OK	RELEASE PSI - HELD
								WASH TRUCK
	2230							JOB COMPLETE

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KANSAS CORPORATION COMMISSION
MAY 21 2007
CONSERVATION DIVISION
WICHITA, KS

THANK YOU
WANDA DUST BERT



CHARGE TO: AMERICAN WARRIOR INC.
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET

No 11184

PAGE 1 OF 1

SERVICE LOCATIONS
 1. NESS CITY, KS
 WELL/PROJECT NO. "2"
 LEASE SCHWARTZ - JORDAN
 COUNTY/PARISH NESS
 STATE KS
 CITY
 2. TICKET TYPE CONTRACTOR
 SERVICE H-D
 SALES
 RIG NAME/NO.
 SHIPPED VIA CT
 DELIVERED TO LOCATED
 3. WELL TYPE WELL CATEGORY JOB PURPOSE WELL PERMIT NO.
 OIL NEU. 10 PMWT C-MWT PORT COLLAR
 REFERRAL LOCATION INVOICE INSTRUCTIONS

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAY 21 2007

DATE 12-1-06
 OWNER SAME
 ORDER NO.
 WELL LOCATION
 NESS, KS - 3E, 6 1/2 S, W5

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 104	20	mi			4.00	80.00
577		1			PUMP SERVICE	1	JOB			850.00	850.00
105		1			PORT COLLAR OPENING TOOL	1	JOB			400.00	400.00
330		1			SWIFT MULTI HOIST STANDS	160	ST			13.50	2160.00
276		1			FLOCS	44	US			1.25	55.00
290		1			D AIR	1	GAL			32.00	32.00
581		1			SERVICE CHARGE C-MWT	175	US			1.10	192.50
583		1			DRYVAGE	17384	US	173.84	TM	1.00	173.84

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 12-1-06 TIME SIGNED 0900
 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
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				3943.34
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				TAX
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.

DATE 12-1-06 PAGE NO. 1

CUSTOMER AMERICAN WARRIOR INC. WELL NO. # 2 LEASE SCHWARTZ - JORDAN JOB TYPE CEMENT PORT COLLAR TICKET NO. 11124

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0900							ON LOCATION
								2 7/8 x 5 1/2
								PORT COLLAR = 1970'
	1150				✓		1000	PSE TEST CASING - HELD
	1155	2 1/2	2	✓		425		OPEN PORT COLLAR - ZJ RATE
	1200	4	89	✓		500		MIX CEMENT 160 SPS SAND 1 1/2" # FLOCC
	1225	4	5	✓		550		DISPLACE CEMENT
	1235				✓		1000	CLOSE PORT COLLAR - PSE TEST HELD
								CIRCULATE 10 SPS CEMENT TO PCT
	1250	4	20		✓		500	RUN 4 JTS - CIRCULATE CLEAN
								WASH TOOL
								PULL TOOL
	1330							JOB COMPLETE

THANK YOU
WAVE DUSTY JEFF

RECEIVED
KANSAS CORPORATION COMMISSION

MAY 21 2007

CONSERVATION DIVISION
WICHITA, KS