

**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 399 120' N & 70' E
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 SIOW 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>01/16/2007</u>	<u>01/25/2007</u>	<u>01/25/2007</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

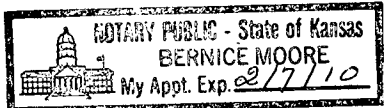
API No. 15 - 135-24578-00-00
County: Ness
of W/2 NE SE Sec. 24 Twp. 19 S. R. 22 East West
2100 feet from S N (circle one) Line of Section
920 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Schaben Well #: 2-24
Field Name: Schaben
Producing Formation: NA
Elevation: Ground: 2214' Kelly Bushing: 2220'
Total Depth: 4364' 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 _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan *NA II NH 7-9-08*
(Data must be collected from the Reserve Pit)
Chloride content 46,000 ppm Fluid volume 775 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: Scott Corsair
Title: Petroleum Engineer Date: 05/18/2007
Subscribed and sworn to before me this 18th 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: Schaben Well #: 2-24
 Sec. 24 Twp. 19 S. R. 22 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction, Neutron/Density	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1447</td> <td>+773</td> </tr> <tr> <td>Chase</td> <td>2324</td> <td>-104</td> </tr> <tr> <td>Heebner</td> <td>3691</td> <td>-1471</td> </tr> <tr> <td>Lansing</td> <td>3740</td> <td>-1520</td> </tr> <tr> <td>Ft. Scott</td> <td>4232</td> <td>-2012</td> </tr> <tr> <td>Cherokee</td> <td>4250</td> <td>-2030</td> </tr> <tr> <td>Mississippian</td> <td>4342</td> <td>-2122</td> </tr> <tr> <td>TD</td> <td>4364'</td> <td>-2144</td> </tr> </table>	Name	Top	Datum	Anhydrite	1447	+773	Chase	2324	-104	Heebner	3691	-1471	Lansing	3740	-1520	Ft. Scott	4232	-2012	Cherokee	4250	-2030	Mississippian	4342	-2122	TD	4364'	-2144
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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

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 (Amount and Kind of Material Used)	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method <input type="checkbox"/> Flowing <input 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

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

ALLIED CEMENTING CO., INC.

Federal Tax I.D. _____

26268

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

SERVICE POINT: Russell

DATE <u>1-16-07</u>	SEC. <u>24</u>	TWP. <u>19</u>	RANGE <u>22</u>	CALLED OUT <u>9:00pm</u>	ON LOCATION <u>11:30pm</u>	JOB START <u>9:00am</u>	JOB FINISH <u>9:45am</u>
LEASE <u>See above</u>		WELL # <u>2-24</u>	LOCATION <u>Bayona 4 1/2 S W 15</u>	COUNTY <u>Nova</u>	STATE <u>KS</u>		
OLD OR NEW (Circle one)							

CONTRACTOR Peter Mark Dutz #1

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 212

CASING SIZE 8 7/8 DEPTH 212

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15

PERFS. _____

DISPLACEMENT 12 3/4

EQUIPMENT _____

PUMP TRUCK CEMENTER Mike

224 HELPER J. W. Schuman

BULK TRUCK _____

342 DRIVER _____

BULK TRUCK _____

_____ DRIVER _____

OWNER _____

CEMENT AMOUNT ORDERED 160 ccm 3 1/2 cc 2 1/2 cc

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE 16

TOTAL _____

REMARKS:

New 23"
circ 8 7/8 casing pump.

SERVICE

DEPTH OF JOB 212

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE 16 @ _____

MANIFOLD _____ @ _____

Wait on loc 7 hrs @ _____

_____ @ _____

CHARGE TO: American Wharves

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

8 7/8 Tap Wood @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

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 Tom R. [Signature]
Allied Cementing
CO INC.

PRINTED NAME _____



CHARGE TO: MICHAEL WARDROP INC. KANSAS CORPORATION COMMISSION
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

RECEIVED
 MAY 21 2007
 CONSERVATION DIVISION

TICKET
 No 11743

PAGE 1 OF 1

SERVICE LOCATIONS
 1. NESS CITY WELL/PROJECT NO. 2-24 LEASE SCHAREN COUNTY/PARISH NESS STATE Kc CITY WICHITA, KS DATE 1-25-07 OWNER SMC
 2. TICKET TYPE SERVICE SALES CONTRACTOR PENNINGTON DRILL #1 RIG NAME/NO. _____ SHIPPED VIA CT DELIVERED TO LEATON ORDER NO. _____
 3. WELL TYPE OTL WELL CATEGORY ABANDONED JOB PURPOSE PTA WELL PERMIT NO. _____ WELL LOCATION BAZIN, Kc - 4 1/2 W.S.
 4. REFERRAL LOCATION _____ INVOICE INSTRUCTIONS _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	UM	QTY.	UM	
875		1			MILEAGE #104	20	MC		4.00	80.00
876P		1			PUMP SERVICE	1	JOB		200.00	200.00
413		1			TOP PLUG	1	CA	8 1/2"	100.00	100.00
302		1			SLIP LIGHT 60/40 P02MX (69601)	185	PCS		9.50	1757.50
206		1			FLOOR	46	LBS		1.25	57.50
205		1			DATE	1	CAI		32.00	32.00
831		1			SAVING CABLE CONDUIT	185	PCS		1.10	203.50
832		1			DAMAGE	15876	LBS	158.76	1.00	158.76

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 Scott
 DATE SIGNED 1-25-07 TIME SIGNED 1430 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?				3129.26
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				NESS TAX 5.3%
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				169.03
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL 3358.29

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES

SWIFT OPERATOR Wardrop APPROVAL _____

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 1-25-07 PAGE NO. 1

CUSTOMER AM. BLOW WARRIOR TX. WELL NO. 2-24 LEASE SWABEN JOB TYPE PTA TICKET NO. 11743

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/DAY)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1430							ON LOCATION
								70-4362' 7 7/8"
								8 5/8 - 212'
	1615		15					1 ST PLUG 50 SKS = 1175'
	1645		15					2 ND PLUG 50 SKS = 740'
	1705		15					3 RD PLUG 50 SKS = 240'
	1725		6					4 TH PLUG 20 SKS = 60' TO TOP
	1730		4 1/2					5 TH PLUG 15 SKS = BATTICE
								WASH TRUCK
	1830							JOB COMPLETE
								THANK YOU WAYNE, DUSTY, ROB

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KANSAS CORPORATION COMM
MAY 21 2007
CONSERVATION DIVISION
WICHITA, KS