

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

*Kevin Wiles
6/24/09*

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4058
Name: American Warrior, Inc.
Address 1: P. O. Box 399
Address 2: _____
City: Garden City State: KS Zip: 67846 + _____
Contact Person: Kevin Wiles, Sr.
Phone: (620) 275-2963
CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: Marc Downing
Purchaser: NCRA

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
 Oil _____ SWD _____ SLOW _____
_____ Gas _____ ENHR _____ SIGW _____
_____ CM (Coal Bed Methane) _____ Temp. Abd. _____
_____ 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. _____ Conv. to SWD _____
_____ Plug Back: _____ Plug Back Total Depth _____
_____ Commingled _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
12-12-08 12-19-08 5-20-09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

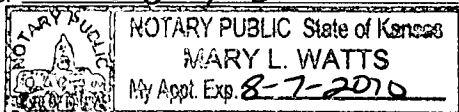
API No. 15 - 009-25,284-0000
Spot Description: _____
SW NE NE SW Sec. 24 Twp. 18 S. R. 15 East West
2300 Feet from North / South Line of Section
2260 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: BARTON
Lease Name: SOPHIE BAHR Well #: 3-24
Field Name: ERNA NORTHWEST
Producing Formation: ARBUCKLE
Elevation: Ground: 1911' Kelly Bushing: 1919'
Total Depth: 3620' Plug Back Total Depth: 3595'
Amount of Surface Pipe Set and Cemented at: 936 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/ API - Dig - 6/24/09 ^{5x cmt}

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 11,000 ppm Fluid volume: 320 bbls
Dewatering method used: HAULED OFF SITE
Location of fluid disposal if hauled offsite: _____
Operator Name: JOHN J. DARRAH
Lease Name: ANSHUTZ SWD 2 License No.: 5088
Quarter _____ Sec. 15 Twp. 21 S. R. 14 East West
County: STAFFORD Docket No.: D-17,893

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: 6-2-09
Subscribed and sworn to before me this 2nd day of June,
20 09.
Notary Public: [Signature]
Date Commission Expires: 8-7-2010



KCC Office Use ONLY

Y Letter of Confidentiality Received
If Denied, Yes No Date: 6/11/09
✓ Wireline Log Received
✓ Geologist Report Received
_____ UIC Distribution

KANSAS CORPORATION COMMISSION

JUN 03 2009

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Operator Name: American Warrior, Inc. Lease Name: SOPHIE BAHR Well #: 3-24
 Sec. 24 Twp. 18 S. R. 15 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 <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: BOREHOLE COMPENSATED SONIC LOG; DUAL INDUCTION LOG; DUAL COMPENSATED PRORSITY LOG; MICRORESISTIVITY LOG;	<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:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Top Anhydrite</td> <td>933</td> <td>+986</td> </tr> <tr> <td>B/Anhydrite</td> <td>963</td> <td>-956</td> </tr> <tr> <td>Topeka</td> <td>2927</td> <td>-1008</td> </tr> <tr> <td>Heebner</td> <td>3167</td> <td>-1248</td> </tr> <tr> <td>Toronto</td> <td>3182</td> <td>-1263</td> </tr> <tr> <td>Lansing</td> <td>3246</td> <td>-1327</td> </tr> <tr> <td>Arbuckle</td> <td>3500</td> <td>-1581</td> </tr> </table>	Name	Top	Datum	Top Anhydrite	933	+986	B/Anhydrite	963	-956	Topeka	2927	-1008	Heebner	3167	-1248	Toronto	3182	-1263	Lansing	3246	-1327	Arbuckle	3500	-1581
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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#	936'	Common	400	3%cc, 2%Gel
PRODUCTION	7-7/8"	5-1/2"	14#	3619'	Standard	165	D-AIR 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				

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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
2	3547-50'; 3530-34'; 3522-25';	1500 GAL. 20% MCA	SAME

TUBING RECORD: Size: <u>2-3/8"</u> Set At: <u>3590'</u> Packer At: <u>NONE</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>Project date of production 7-13-09</u>		Producing Method: <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. <u>N/A</u>	Gas Mcf <u>N/A</u>	Water Bbls. <u>N/A</u> Gas-Oil Ratio Gravity

N/A
 Per
 6/10/09
 KCC

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Date: June 2, 2009

Kansas Corporation Commission
Finney State Office Building
130 S. Market, Room 2078
Wichita, Kansas 67202-3802

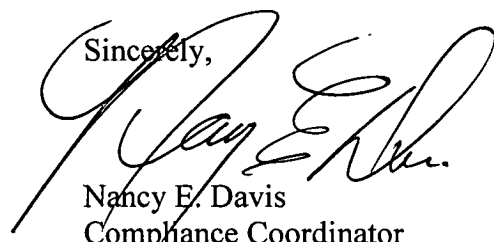
RE: Well Sophie Bahr 3-24

API#: 015-009-25,204

Dear Corporation Commission,

American Warrior, Inc. request that you please hold the enclosed information confidential for as long as the law allows.

Sincerely,



Nancy E. Davis
Compliance Coordinator

NED

Enclosure

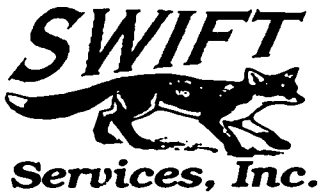
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American Warrior, Inc.

P.O. Box 399 • Garden City, Kansas 67846 • (620) 275-9231



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

TICKET No 15239

PAGE 1 OF 2

SERVICE LOCATIONS:
 1. *Hays, Ks.* WELL/PROJECT NO. *#3-24* LEASE *Sophie Bahr* COUNTY/PARISH *Barton* STATE *Ks* CITY DATE *12-19-08* OWNER *Same*
 2. *Ness City, Ks.* TICKET TYPE SERVICE SALES CONTRACTOR *Duke Polg #8* RIG NAME/NO. SHIPPED VIA *ET Location* DELIVERED TO ORDER NO.
 3. WELL TYPE *Oil* WELL CATEGORY *Development* JOB PURPOSE *Cement Logging* WELL PERMIT NO. WELL LOCATION
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE #111	50	mi			7.00	350.00
578		1			Pump Charge (Logging)	1	ea	3620	'	1400.00	1400.00
221		1			Liquid KCL	2	gal			26.00	52.00
281		1			Mud Flush	500	gal			1.00	500.00
290		1			D-Air	2	gal			35.00	70.00
402		1			Centralizer	8	ea	5 1/2	"	100.00	800.00
403		1			Basket	1	ea			300.00	300.00
406		1			LD Plug & Ball Pls	1	ea			260.00	260.00
407		1			Insert Float Shoe w/Flt	1	ea			325.00	325.00

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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 *Steve Steiner*
 DATE SIGNED *12-19-08* TIME SIGNED *2330* 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		AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				PAGE TOTAL 1	4057.00
WE UNDERSTOOD AND MET YOUR NEEDS?				page 2	4150.80
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				subtotal	8207.80
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Barton TAX 6.3%	339.38
ARE YOU SATISFIED WITH OUR SERVICE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	8547.18
<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 *Mark Horne* APPROVAL
 Thank You!



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

TICKET CONTINUATION

TICKET No. 15239

CUSTOMER American Warrior Inc WELL 23-24 Sepho Bahr DATE 12-19-08 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		UNIT PRICE		AMOUNT		
		LOC	ACCT	DE			QTY.	UM	QTY.	UM	QTY.	UM	
325		2				Standard Cement	165	SKS	13	00	2145	00	
275		2				Flocele	50	#	1	50	75	00	
283		2				Salt	850	#		20	170	00	
284		2				Calseal	8	SKS	30	00	240	00	
285		2				CFR-1	100	#	4	50	450	00	
581		2				SERVICE CHARGE	165	SKS	2	90	313	90	
589		2				MILEAGE CHARGE			432	25	757	30	
											CONTINUATION TOTAL		4150 80

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JOB LOG

SWIFT Services, Inc.

DATE 12-19-08 PAGE NO.

CUSTOMER American Warrior Inc

WELL NO. # 3-24

LEASE Sophie Bahr

JOB TYPE cement long string

TICKET NO. 15239

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1920							on loc w/ FE
								RTD 3620' LTD 3623' 5 1/2" x 14# x 3625' x 20' Lent. 2, 4, 6, 8, 10, 12, 14, 16 Basket 3
	1935							Start FE
	2115							Break Circ.
	2220	2.5	6/3					Plug R H & MH 25/15 sks EA-2
	2230	4	0			200		Start Mud Flush 25 sks EA-2
		4	12/0			200		Start KCL Flush
	2240	5	20/0			250		Start Cement 196 sks EA-2
	2245		30					End Cement Wash P&L Drop L.D. Plug
	2250	6	0			250		Start Displacement
	2300	5	64			300		Catch Cement
	2305		88			650/200		Land Plug Release Pressure Float Held

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Thank you

Nick, Josh F. & Shane

