

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

Handwritten initials and date: KCC, MW, 9/24/08

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: NCRA
Operator Contact Person: Kevin Wiles, Sr.
Phone: (620) 275-2963
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Jim Dilts

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>7-25-08</u>	<u>8-3-08</u>	<u>8-4-08 Plugged</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 077-21,634-0000
County: Harper County, KS
NW SE SE SE Sec. 15 Twp. 34 S. R. 7 East West
650 FSL feet from (S) / N (circle one) Line of Section
335 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: CROFT FARMS Well #: 1-15
Field Name: Wildcat

Producing Formation: _____
Elevation: Ground: 1324' Kelly Bushing: 1335'
Total Depth: 5111' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at 253 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 *DA AH I NR*
(Data must be collected from the Reserve Pit) 11-5-08
Chloride content 9000 ppm Fluid volume 240 bbls
Dewatering method used EVAPORATE

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: Compliance Coordinator Date: 9-18-08

Subscribed and sworn to before me this 18th day of September, 2008.

Notary Public: [Signature]
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 **KANSAS CORPORATION COMMISSION**

SEP 24 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: American Warrior, Inc. Lease Name: CROFT FARMS Well #: 1-15
 Sec. 15 Twp. 34 S. R. 7 East West County: Harper County, KS

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 Compensated Porosity Log, Dual Induction Log, Borehole Compensated Sonic Log, Microresistivity Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum No Geo Report - Jim Dilts
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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 Pipe	12-1/4"	8-5/8"	23#	253'	60/40 Poz	195	3%CC, 2% Gel

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	N/A			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
	DRY HOLE		

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 CONSERVATION DIVISION
 WICHITA, KS

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr.			Producing Method				
N/A			<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		
	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) PLUGGED 8-4-08

Production Interval _____

ALLIED CEMENTING CO., LLC. 31284

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

SERVICE POINT:
Medicine Lodge, KS

DATE <u>8-4-08</u>	SEC. <u>15</u>	TWP. <u>34S</u>	RANGE <u>7W</u>	CALLED OUT <u>9:00 pm</u>	ON LOCATION <u>12:30 pm</u>	JOB START <u>2:00 pm</u>	JOB FINISH <u>3:00 pm</u>
LEASE <u>Croft Farms</u>	WELL # <u>1-15</u>	LOCATION <u>Anthonys, KS 6S, 1W</u>			COUNTY <u>Harper</u>	STATE <u>KS</u>	
OLD OR <u>(NEW)</u> (Circle one)			<u>1 N, W into</u>				

CONTRACTOR Duke #5

TYPE OF JOB Roadry plus

HOLE SIZE 7 7/8 T.D. 1300

CASING SIZE 8 5/8 DEPTH 250

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 3 bb's water 10 mud

OWNER American Warrior

CEMENT

AMOUNT ORDERED 145cy 60' 40' 4

EQUIPMENT

PUMP TRUCK CEMENTER Darin F.

343 HELPER Steve K.

BULK TRUCK

389 DRIVER Max / Rick M.

BULK TRUCK

_____ DRIVER _____

COMMON	<u>87 A</u>	@ <u>15.45</u>	<u>1344.15</u>
POZMIX	<u>58</u>	@ <u>8.00</u>	<u>464.00</u>
GEL	<u>5</u>	@ <u>20.80</u>	<u>104.00</u>
CHLORIDE		@ _____	_____
ASC		@ _____	_____
		@ _____	_____
		@ _____	_____
		@ _____	_____
		@ _____	_____
		@ _____	_____
		@ _____	_____
		@ _____	_____
HANDLING	<u>150</u>	@ <u>2.40</u>	<u>360.00</u>
MILEAGE	<u>45 x 150 x .10</u>		<u>675.00</u>
TOTAL			<u>2947.15</u>

REMARKS:

- 1st plug - mix 35sr 9+ 1300'
- 2nd plug - mix 35sr 9+ 900'
- 3rd plug - mix 35sr 9+ 250'
- 4th plug - mix 25sr 9+ 60'
- Rerob - mix 15sr

SERVICE

DEPTH OF JOB	<u>1300'</u>		
PUMP TRUCK CHARGE			<u>1017.00</u>
EXTRA FOOTAGE		@ _____	_____
MILEAGE	<u>45</u>	@ <u>7.00</u>	<u>315.00</u>
MANIFOLD		@ _____	_____
		@ _____	_____
		@ _____	_____
TOTAL			<u>1332.00</u>

CHARGE TO: American Warrior

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@ _____	_____
<u>none</u>	@ _____	_____
	@ _____	_____
	@ _____	_____
TOTAL _____		

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME X SONNY MARTIN

SIGNATURE X Sonny Martin

SALES TAX (If Any) _____

TOTAL CHARGES ~~2947.15~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

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KANSAS CORPORATION COMMISSION
SEP 24 2008
CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 31264

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

SERVICE POINT:

DATE <u>7-25-08</u>	SEC. <u>15</u>	TWP. <u>34s</u>	RANGE <u>7W</u>	CALLED OUT <u>9:30 pm</u>	ON LOCATION <u>11:00 pm</u>	JOB START <u>2:30 am</u>	JOB FINISH <u>3:30 am</u>
LEASE <u>CROFT FARMS</u>				LOCATION <u>ANTHONY, KS, L SOUTH, 1 WEST, HANFORD</u>		COUNTY <u>HANFORD</u>	STATE <u>KS</u>
WELL # <u>1-15</u>				LOCATION <u>1 NORTH, W/SIDE</u>			
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR DUKO S

TYPE OF JOB SURFACE CASING

HOLE SIZE 12 1/4" T.D. 253'

CASING SIZE 8 3/8" DEPTH 251'

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 200 MINIMUM 100

MEAS. LINE _____ SHOE JOINT 15'

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 15 bbl. FRESH WATER

OWNER AMERICAN WARRIOR

CEMENT

AMOUNT ORDERED 195 sq 6014012+38 cc

EQUIPMENT

PUMP TRUCK CEMENTER BILL M.

343 HELPER STOV K.

BULK TRUCK

364 DRIVER NEWTON D.

BULK TRUCK

_____ DRIVER _____

COMMON	<u>117 A</u>	@	<u>15.45</u>	<u>1807.65</u>
POZMIX	<u>78</u>	@	<u>8.00</u>	<u>624.00</u>
GEL	<u>3</u>	@	<u>20.80</u>	<u>62.40</u>
CHLORIDE	<u>6</u>	@	<u>58.20</u>	<u>349.20</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>204</u>	@	<u>2.40</u>	<u>489.60</u>
MILEAGE	<u>45 x 204 x .10</u>			<u>918.00</u>
TOTAL				<u>4250.85</u>

REMARKS:

PIPS ON BOTTOM, BREAK CIRCULATION,
PUMP PRE-FLUSH, PUMP 195 sq 6014012
+38 cc, STOP PUMPS, RELEASE PLUG,
START DISPLACEMENT, SEE LIST,
SCAN RATE, DISPLACE WITH 15 bbl.
FRESH WATER, STOP PUMPS, SHUT-IN,
CIRCULATE CEMENT.

SERVICE

DEPTH OF JOB	<u>251'</u>			
PUMP TRUCK CHARGE			<u>1018.00</u>	
EXTRA FOOTAGE		@		
MILEAGE	<u>45</u>	@	<u>7.00</u> <u>315.00</u>	
MANIFOLD <u>HEAD RENT</u>		@	<u>113.00</u> <u>113.00</u>	
		@		
		@		
TOTAL				<u>1446.00</u>

CHARGE TO: AMERICAN WARRIOR

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>8 3/8" WOODEN PLUG 1</u>	@	<u>68.00</u>	<u>68.00</u>	
	@			
	@			
	@			
TOTAL				<u>68.00</u>

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PRINTED NAME SONNY MARTIN

SIGNATURE Sonny Martin

SALES TAX (If Any) _____

TOTAL CHARGES ~~4250.85~~

DISCOUNT ~~315.00~~ IF PAID IN 30 DAYS

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

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