

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4058
Name: American Warrior, Inc.
Address 1: PO Box 399
Address 2: _____
City: Garden City State: KS Zip: 67846 + 0399
Contact Person: Scott Corsair
Phone: (785) 398-2270
CONTRACTOR: License # 33323
Name: Petromark Drilling, LLC
Wellsite Geologist: Scott Corsair
Purchaser: NCRA

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
 Oil _____ SWD _____ SIOW _____
_____ 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.: _____
10/05/2007 10/12/2007 11/14/2007
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 135-24658-0000
Spot Description: 40' W
N/2 NW SW Sec. 34 Twp. 19 S. R. 21 East West
2310 Feet from North / South Line of Section
620 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ness
Lease Name: Moore Well #: 2-34
Field Name: Corsair
Producing Formation: Mississippian
Elevation: Ground: 2268' Kelly Bushing: 2274'
Total Depth: 4426' Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at: 220 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1479 Feet
If Alternate II completion, cement circulated from: 1479
feet depth to: surface w/ 130 ^{sx crat.}
PHZ-Dlg - 8/5/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 42,500 ppm Fluid volume: 400 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: _____
Title: Petroleum Engineer Date: 05/07/2009

Subscribed and sworn to before me this 7th day of May,
20 09.

Notary Public: Denise Corsair
Date Commission Expires: 8-15-12

NOTARY PUBLIC - State of Kansas
DENISE CORSAIR
My Appt. Exp. 8-15-12

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received

UIC Distribution

Operator Name: American Warrior, Inc. Lease Name: Moore Well #: 2-34
 Sec. 34 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 <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: Gamma-Ray Neutron CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" 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>1493</td> <td>+781</td> </tr> <tr> <td>Heebner</td> <td>3782</td> <td>-1508</td> </tr> <tr> <td>Lansing</td> <td>3820</td> <td>-1546</td> </tr> <tr> <td>Pawnee</td> <td>4288</td> <td>-2014</td> </tr> <tr> <td>Ft. Scott</td> <td>4321</td> <td>-2047</td> </tr> <tr> <td>Cherokee</td> <td>4348</td> <td>-2074</td> </tr> <tr> <td>Mississippian</td> <td>4418</td> <td>-2144</td> </tr> </table>	Name	Top	Datum	Anhydrite	1493	+781	Heebner	3782	-1508	Lansing	3820	-1546	Pawnee	4288	-2014	Ft. Scott	4321	-2047	Cherokee	4348	-2074	Mississippian	4418	-2144
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Ft. Scott	4321	-2047																							
Cherokee	4348	-2074																							
Mississippian	4418	-2144																							

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	220'	Common	160	2% gel, 3% CC
Production	7 7/8"	5 1/2"	15.5	4423'	Swift 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	1479'-Surface	Swift SMD	130	1/4# flocele

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	4418.5-4425'		

TUBING RECORD:	Size: 2 3/8"	Set At: 4400'	Packer At: NA	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 11/15/2007		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. 25	Gas Mcf	Water Bbls. 25	Gas-Oil Ratio 44

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input checked="" 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: 4418.5-23' Perf 4423-26' OH
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CHARGE TO: AMERICAN WOODWORK INC.
 ADDRESS:
 CITY, STATE, ZIP CODE:

RECEIVED
 JUL 31 2009
 KCC WICHITA

TICKET
 No 13112

PAGE	OF
1	1

SERVICE LOCATIONS 1. <u>2-24</u>	WELL/PROJECT NO. <u>2-24</u>	LEASE <u>MOORE</u>	COUNTY/PARISH <u>NESS</u>	STATE <u>Ks</u>	CITY	DATE <u>11-2-07</u>	OWNER <u>SAME</u>
2.	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>H-A</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.	
3.	WELL TYPE <u>012</u>	WELL CATEGORY <u>DEVELOPMENT</u>	JOB PURPOSE <u>CONCRETE PORT COLLAR</u>	WELL PERMIT NO.	WELL LOCATION <u>BAZARK - 3E 81/2 E WTD</u>		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE		AMOUNT
		LOC	ACCT	DF								
75		1			MILEAGE # 104	30		ME		4.00		120.00
577		1			PUMP SERVICE	1		JOB		850.00		850.00
288		1			SACK SAND 20/40	1		SCK		25.00		25.00
105		1			PORT COLLAR OPENING TOOL	1		JOB		400.00		400.00
330		1			SWIFT MUIZ - BOWSER STANDARDS	130		SCK		14.50		1885.00
276		1			FLOCEL	50		WBS		1.25		62.50
290		1			D-APR	2		WAL		32.00		64.00
581		1			SERVICE CHARGE CONCRETE	200		SCK		1.10		220.00
583		1			DRAYAGE	19970		WBS	299.55/TW	1.00		299.55

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
 DATE SIGNED 11-2-07 TIME SIGNED 11:30 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?					3926.05
WE UNDERSTOOD AND MET YOUR NEEDS?					
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					

JOB LOG

SWIFT Services, Inc.

DATE 11-8-07 PAGE NO. 1

CUSTOMER AMERICAN WARRIOR INC WELL NO. 2-24 LEASE MOORE JOB TYPE CEMENT PORT COLLAR TICKET NO. 13112

CHART NO.	TIME	RATE (BPM)	VOLUME (BBLS) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1430							ON LOCATION
								2 3/8 x 5/8 REP = 3950 PORT COLLAR = 1479'
	1545		95		✓		1000	LOADS HOLE - T/ST REP - SPOT 10 BBLS 1/2" SAND = 3920'
	1650	3	2	✓		300		OPEN PORT COLLAR - INJ RATE
	1655	4	72	✓		400		MIX CEMENT - 130 SLS SAND 1/4" / 1/2 FLOCCS
	1715	3 1/2	5	✓		450		DISPLACE CEMENT
	1725			✓		1000		CLOSE PORT COLLAR - PSE TEST - HOLD CIRCULATE 10 SLS CEMENT TO PSE
	1735	4	20	✓		450		RUN 4 SLS - CIRCULATE CLEAN WASH BULK
	1845	3	40	✓		500		RUN TUBING - CIRCULATE SAND OFF REP
	1930							JOB COMPLETE

THANK YOU
WARR, BRETT, RYAN

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

TICKET No 12849

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 KCC WICHITA

PAGE 1 OF 2

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 2-34	LEASE MOORE	COUNTY/PARISH NESS	STATE KS	CITY	DATE 10-12-07	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR PEROMARV NIGL	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 5 1/2" LONGSTRENG	WELL PERMIT NO.	WELL LOCATION BAZEL, KS - 3E 6 1/2 S, E5		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	UM	QTY.	UM	
575		1			MILEAGE # 104	25	FE	4.00		100.00
578		1			PUMP SERVICE	1	JOB	1250.00	4424	1250.00
221		1			LIQUID KCC	2	GA	26.00		52.00
281		1			MUD FLUSH	500	GA	.75		375.00
402		1			CEMENTIZERS	5	GA	95.00	5 1/2"	475.00
403		1			CEMENT BASKETS	2	GA	290.00		2300.00
404		1			POAT COLLAR TOP JT #71	1	GA	2300.00	1479	580.00
406		1			CATCH DOWN PLUG - BAFFLE	1	GA	235.00		235.00
407		1			INSERT FEAT SHOE W/ AVOID FILL	1	GA	310.00		310.00
419		1			ROTATING HEAD DRILL	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 10-12-07 TIME SIGNED 1000 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	5927.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	2884.24
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 *Wanda Wilson* APPROVAL

Thank You!



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

TICKET CONTINUATION

TICKET No. 12849

CUSTOMER AMERICAN WARRIOR INC. WELL MOORE 2-34 DATE 10-12-07 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
325		1				STANDARD CEMENT EA-2	150	SKS			12.00	1800.00
376		1				PIECE	38	URS			1.25	47.50
183		1				SALT	750	URS			.20	150.00
284		1				CALSAI	7	SKS	700	URS	30.00	210.00
295		1				CEM-I	71	URS			4.00	284.00
290		1				D-AR	1	GN			32.00	32.00
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581		1				SERVICE CHARGE	CUBIC FEET		150		1.10	165.00
583		1				MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES	195.74	1.00	195.74
							15659	25				

CONTINUATION TOTAL 2884.24

JOB LOG

SWIFT Services, Inc.

DATE 10-12-07 PAGE NO. 7

CUSTOMER AMERICAN WARRIOR ZAC WELL NO. 2-34 LEASE MOORE JOB TYPE 5/8" LOGGING TICKET NO. 12249

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1000							ON LOCATION
	1130							START 5/2" CASING IN WELL
								TD-4424 SET @ 4423
								TP-4429 5/2" 15.5
								ST-42.97
								CORRECTION - 1, 2, 4, 5, 70
								CMT BRIS - 6, 71
								PORT COLAR @ 1479 TOP BIT " 71
	1325							DROP BALL - CALCULATE ROTATE
	1432	6	12		✓		450	PUMP 500 GAL MUDFLUSH "
	1434	6	20		✓		450	PUMP 20 BRIS REL. FLUSH "
	1440		4					PLUG RH
	1445	5	36		✓		350	MIX CMWT - 150 SPS SA-2 "
	1453							WASH OUT PUMP LINES
	1454							RELEASE LATCH DOWN PLUG
	1455	7	0		✓			DISPLACE PLUG "
		7	94				650	SLIP OFF ROTATING
	1510	6 1/2	104.4				1500	PLUG DOWN - PSE UP LATCH IN PLUG
	1512						OK	RELEASE PSE - HELD
								WASH NOZZ
	1600							JOB COMPLETE

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THANK YOU
WJAKE, BETTY, RYAN

ALLIED CEMENTING CO., INC.

30932

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

SERVICE POINT:
Great Bend

DATE <u>10-5-07</u>	SEC. <u>34</u>	TWP. <u>19S</u>	RANGE <u>21W</u>	CALLED OUT <u>8:00 PM</u>	ON LOCATION <u>10:00 PM</u>	JOB START <u>10:30 PM</u>	JOB FINISH <u>11:30 PM</u>
LEASE/WOARE		WELL# <u>7-34</u>	LOCATION <u>Bazine 3E 10S E into</u>		COUNTY <u>IVESS</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Petronark Rig 1
 TYPE OF JOB SURFACE
 HOLE SIZE 12 1/4 T.D. 220
 CASING SIZE 8 5/8 DEPTH 227
 TUBING SIZE DEPTH
 DRILL PIPE 4 1/2 DEPTH
 TOOL DEPTH
 PRES. MAX 200 MINIMUM 50
 MEAS. LINE SHOE JOINT 15'
 CEMENT LEFT IN CSG. 15'
 PERFS.
 DISPLACEMENT FRESH WATER 13 1/2 BBLs

OWNER AMERICAN WARRIOR inc.

CEMENT
 AMOUNT ORDERED 1605x common + 3% cc + 2% gel

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

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 TOTAL

EQUIPMENT

PUMP TRUCK CEMENTER Dwayne W
 # 120 HELPER Wayne D
 BULK TRUCK
 # 3412 DRIVER Carl S
 BULK TRUCK
 # DRIVER

REMARKS:

pipe on bottom break circulation
pump 1605x common + 3% cc + 2% gel
shut down released plug and
disp with 13 1/2 BBLs off fresh
water shut in cement dip
circulation

Rig Down

SERVICE

DEPTH OF JOB 227
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD Head Rent _____ @ _____
 _____ @ _____
 _____ @ _____

CHARGE TO: AMERICAN WARRIOR inc.
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL _____

THANK YOU

PLUG & FLOAT EQUIPMENT

8 5/8 wooden 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 Ed Miller

Ed Miller
 PRINTED NAME