

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

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

API No. 15 - 135-24757-0000
Spot Description: 35' S 90' E
NW SW NW Sec. 20 Twp. 19 S. R. 21 East West
1615 Feet from North / South Line of Section
420 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

CONTRACTOR: License # 33323 **KANSAS CORPORATION COMMISSION**
Name: Petromark Drilling, LLC
Wellsite Geologist: Scott Corsair
Purchaser: NCRA

County: Ness
Lease Name: Rein Well #: 2-20
Field Name: Hinnergardt
Producing Formation: Mississippian

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.)

Elevation: Ground: 2272' Kelly Bushing: 2278'
Total Depth: 4416' Plug Back Total Depth: 4413'
Amount of Surface Pipe Set and Cemented at: 229 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1488 Feet
If Alternate II completion, cement circulated from: 1488
feet depth to: surface w/ 125 ^{sx.cmt}

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.: _____
03/11/2008 03/18/2008 04/10/2008
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 42,000 ppm Fluid volume: 300 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: Petroleum Engineer Date: 08/12/2009

Subscribed and sworn to before me this 12th day of August
20 09

Notary Public: [Signature]
Date Commission Expires: 8-15-12

KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 [unclear] Report Received

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

Operator Name: American Warrior, Inc. Lease Name: Rein Well #: 2-20
 Sec. 20 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: Dual Receiver Cement Bond, 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:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1490</td> <td>+788</td> </tr> <tr> <td>Heebner</td> <td>3752</td> <td>-1474</td> </tr> <tr> <td>Lansing</td> <td>3792</td> <td>-1514</td> </tr> <tr> <td>BKC</td> <td>4118</td> <td>-1840</td> </tr> <tr> <td>Ft. Scott</td> <td>4286</td> <td>-2008</td> </tr> <tr> <td>Cherokee</td> <td>4304</td> <td>-2026</td> </tr> <tr> <td>Mississippian</td> <td>4388</td> <td>-2110</td> </tr> </table>	Name	Top	Datum	Anhydrite	1490	+788	Heebner	3752	-1474	Lansing	3792	-1514	BKC	4118	-1840	Ft. Scott	4286	-2008	Cherokee	4304	-2026	Mississippian	4388	-2110
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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	229'	Common	160	2% gel, 3% CC
Production	7 7/8"	5 1/2"	15.5	4414'	EA-2	150	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: <input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
	1488'-Surface	Swift SMD	1215	1/4# flocele

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	4400-4412.5'		

TUBING RECORD:	Size: 2 3/8"	Set At: 4380'	Packer At: NA	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 04/10/2008	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. 20	Gas Mcf	Water Bbls. 45	Gas-Oil Ratio	Gravity 39

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 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: 4400-4412.5' Perf
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CHARGE TO: *American Wellco, Inc.*
 ADDRESS:
 CITY, STATE, ZIP CODE:

KANSAS CORPORATION COMMISSION
 AUG 13 2009
 RECEIVED

TICKET
 No 13528

PAGE 1 OF 1

SERVICE LOCATIONS 1. <i>Hayes, Ks</i> 2. <i>Alton, Ks</i> 3. 4.	WELL/PROJECT NO. <i>2-20</i>	LEASE <i>Riann</i>	COUNTY/PARISH <i>Ness</i>	STATE <i>Ks</i>	CITY	DATE <i>7-3-08</i>	OWNER
	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>H-D</i>	RIG NAME/NO.	SHIPPED VIA <i>CT</i>	DELIVERED TO <i>SPAZING, Vc</i>	ORDER NO.	
	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Drillpoint</i>	JOB PURPOSE <i>Mount Port Collar</i>	WELL PERMIT NO.	WELL LOCATION		
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # <i>106</i>			<i>20</i>	<i>mi</i>	<i>600</i>	<i>12000</i>
578		1			Pump Charge - Port Collar			<i>1</i>	<i>hour</i>	<i>14000</i>	<i>14000</i>
290		1			D. Air			<i>2</i>	<i>gal</i>	<i>3500</i>	<i>7000</i>
208		1			Sand - <i>20/40</i>			<i>1</i>	<i>sk</i>	<i>2500</i>	<i>2500</i>
230		2			SAND cement			<i>125</i>	<i>sk</i>	<i>11750</i>	<i>1468750</i>
270		2			Fluocel <i>1/4 #1sk</i>			<i>32</i>	<i>lb</i>	<i>150</i>	<i>4800</i>
581		2			Service Charge Cement			<i>200</i>	<i>sk</i>	<i>1800</i>	<i>36000</i>
582		2			Diaryage <i>20mi</i>			<i>199.05</i>	<i>TM</i>	<i>19905</i>	<i>398134</i>
104		2			Port Collar Tool Rental			<i>1</i>	<i>hour</i>	<i>25000</i>	<i>25000</i>

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* by *Don L.*

DATE SIGNED *7-3-08* 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	<i>4578 84</i>
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	<i>4702 36</i>

NESS TAX 5.3% *123 52*

JOB LOG

SWIFT Services, Inc.

DATE 4-2-07 PAGE NO. 1

CUSTOMER American Well Drilling Co. WELL NO. 2-20 LEASE R.O.N. JOB TYPE Cement Port Callar TICKET NO. 17528

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1230							On location - set up rig
	1250		97					Load Hole with salt H ₂ O
						900	900	Place 1st RBP 4 Cor, Tbc - 1466'
	1230		14					Spot 1st sand @ 3927'
	1240		4					Rig pull 1/2 to Port Callar 1488'
		5				500	1488	Open Port Callar - (1/2 hrs bkwd)
			3					Start mixing SMD cut, 1/4" 1st floccul
			65					Have returns to surface 3 EBI pump
			69					Cement circulate to surface
								Tail in cut - Fin mixing 125 sts
						800	500	Displ 5 EBI 1/20 -
								Place P.C. 7 Trst
								Rig run 1/2 Jt. H ₂ O
			50					Row-out cut 7 Pump Ann Vol.
								Fin Row-out fresh H ₂ O
								(Open 2 flags)
								Rig pull Jt above P.C.
	2130							Wash up & Deck up rig
								Vib complete
								Don't Blaine & Cole



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

TICKET
 No 13985

PAGE 1 OF 2

AUG 13 2009
 RECEIVED
 MISS LORETTA (1011-2510)

SERVICE LOCATIONS 1. <u>NESS CITY, KS</u>	WELL/PROJECT NO. <u>2-20</u>	LEASE <u>REYN ESTATE</u>	COUNTY/PARISH <u>NESS</u>	STATE <u>KS</u>	CITY	DATE <u>3-18-08</u>	OWNER <u>SAME</u>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>PEROMARK DRIG. #1</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.	
3.	WELL TYPE <u>OIL</u>	WELL CATEGORY <u>DEVELOPMENT</u>	JOB PURPOSE <u>5 1/2" LOGSTRING</u>	WELL PERMIT NO.	WELL LOCATION <u>RAVENS, KS - 3S, 1E, 1 1/2S, E5</u>		
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 # 110	20	MI			6.00	120.00
578		1			PUMP SERVICE	1	JOB	4416	X	1400.00	1400.00
221		1			LIQUID KCL	2	GA			26.00	52.00
281		1			MUD FLUSH	500	GA			1.00	500.00
402		1			CENTRALIZERS	5	EA	5 1/2"		100.00	500.00
403		1			CEMENT BASKETS	2	EA			300.00	600.00
404		1			PORT COLLAR TOP JT # 74	1	EA	1488	FT	2300.00	2300.00
406		1			LATCH DOWN PLUG + RAFFLE	1	EA			235.00	235.00
407		1			INSTAT FLOAT SHOE W/ AUTO FILL	1	EA			310.00	310.00
419		1			ROTATING HOSE RENTAL	1	JOB			250.00	250.00

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X [Signature]
 DATE SIGNED 0100 TIME SIGNED 3-18-08
 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?				#1	6017.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	3409.04
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				TAX	
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TOTAL	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO		<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 WAKE WILSON APPROVAL _____

Thank You!



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

TICKET CONTINUATION

TICKET No. 13985

CUSTOMER
AMERICAN WARRIOR INC

WELL
REYN ESTATE 2-20

DATE 3-18-08 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	WELL				UNIT PRICE	AMOUNT	
		LOG	ACCT	DF			QTY	UD	QTY	WT			
325		1				STANDARD CEMENT	EA-2	150	SLS			12.75	1912.50
276		1				FLOCELE		38	LBS			1.50	57.00
283		1				SALT		750	LBS			1.20	150.00
284		1				CALSEA		7	SLS	700	LBS	30.00	210.00
285		1				CTR-1		100	LBS			4.50	450.00
290		1				D-AR		2	GAL			35.00	70.00
581		1				SERVICE CHARGE						1.90	285.00
583		1				MILEAGE CHARGE						1.75	274.54

ESCROW CORPORATION COMMISSION
 AUG 13 2009

SERVICE CHARGE CUBIC FEET 150 1.90 285.00
 MILEAGE CHARGE TOTAL WEIGHT 15688 LOADED MILES 20 TON MILES 156.88 1.75 274.54

CONTINUED DISTANCE 3409.04

JOB LOG

SWIFT Services, Inc.

DATE **3-18-08** PAGE NO.

CUSTOMER **AMERICAN WOODCOCK INC.** WELL NO. **2-20** LEASE **REYN ESTATE** JOB TYPE **5 1/2" LOGSTRIJC** TICKET NO. **13985**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0030							ON LOCATION
	0100							START 5 1/2" CASING IN WELL
								TD - 4416 SET = 4415
								TP - 4421 5 1/2" / FT 15.5
								ST - 40.15
								CONTRACT # 1, 2, 3, 4, 73
								CONT BSKTS - 5, 74
								PORT COLLAR = 1/88 TOP JT # 74
	0300							DROP BALL - CIRCULATE - ROTATE
	0405	6	12		✓		450	PUMP 500 GAL MUD FLOW
	0407	6	20		✓		450	PUMP 20 BBL KCL - FLOW
	0412		4					PLUG RH
	0415	4 1/4	36		✓		300	MIX CEMENT 150 SLS EA-2 = 15.5 PPG
	0425							WASH OUT PUMP LINES
	0426							RELEASE CATCH DOWN PLUG
	0428	7	0		✓			DISPLACE PLUG
		6 1/2	103				750	SHOT OFF ROTATING
	0443	6 1/2	104.3				1500	PLUG DOWN - PSE UP LATCH IN PLUG
	0445						OK	RELEASE PSE - HEAD
								WASH TRUCK
	0600							JOB COMPLETE

AMERICAN WOODCOCK INC.
AUG 13 2008

THANK YOU
WAYNE BOYD, RYAN

ALLIED CEMENTING CO., INC.

30822

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

SERVICE POINT:
Great Bend

DATE <u>3-14-08</u>	SEC <u>20</u>	TWP. <u>19S</u>	RANGE <u>21W</u>	CALLED OUT <u>8:30 PM</u>	ON LOCATION <u>11:00 PM</u>	JOB START <u>12:00 PM</u>	JOB FINISH <u>1:00 PM</u>
LEASE <u>REIN</u>	WELL # <u>2-20</u>	LOCATION <u>BAZINE 1/5 1E 1/2 N</u>	COUNTY <u>NESS</u>	STATE <u>KS</u>			
OLD OR <u>NEW</u> (Circle one)			<u>E/INTO</u>				

CONTRACTOR PETROMARK RIG 1 OWNER American Warrior-inc

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D. 232 CEMENT

CASING SIZE 8 5/8 DEPTH 228.85 AMOUNT ORDERED 160 SY COMMENT

TUBING SIZE DEPTH 3%CC + 2% GEL

DRILL PIPE 1 1/2 DEPTH

TOOL DEPTH

PRES. MAX 200 MINIMUM 50 COMMON @

MEAS. LINE SHOE JOINT 15' POZMIX @

CEMENT LEFT IN CSG. 15' GEL @

PERFS. CHLORIDE @

DISPLACEMENT FRESH WATER 13 1/2 BBLS ASC @

EQUIPMENT

PUMP TRUCK CEMENTER DWAYNE W

181 HELPER WAYNE D.

BULK TRUCK

342 DRIVER GELLEN D.

BULK TRUCK

DRIVER

HANDLING @

MILEAGE @

REMARKS:

PIPE ON BOTTOM BREAK CIRCULATION
PUMP 160 SY COMMENT + 3%CC + 2% GEL
SHUT DOWN RELEASED PLUG
AND DISP WITH 13 1/2 BBLS OF FRESH
WATER SHUT IN CEMENT DID
CIRCULATE

DEPTH OF JOB 228.85

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

MANIFOLD Head Rent @

KANSAS CORPORATION COMMISSION
AUG 13 2009
TOTAL RECEIVED

CHARGE TO: American Warrior inc

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

@
@
@
@
@

TOTAL

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME

Thank you

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.