

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

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: N/A
Operator Contact Person: Kevin Wiles, Sr.
Phone: (620) 275-2963
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Steven P. Murphy, PG

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>3-2-06</u>	<u>3-11-06</u>	<u>5-31-06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-22,983 -00-00
County: Barber
C SE SE Sec. 10 Twp. 32 S. R. 15 East West
580 FSL feet from S / N (circle one) Line of Section
330 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: Alexander Well #: 1-10
Field Name: Deer Head East
Producing Formation: Arbuckle
Elevation: Ground: 1950' Kelly Bushing: 1963'
Total Depth: 5275' Plug Back Total Depth: 5275'
Amount of Surface Pipe Set and Cemented at 312' 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
(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: American Warrior, Inc.
Lease Name: Alexander N 1 License No.: 4058
Quarter SW Sec. 11 Twp. 32 S. R. 15 East West
County: Barber Docket No.: D-28,554

Handwritten: AH 1 - Dig. 12/01/08

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: Compliance Coordinator Date: 10-18-06
Subscribed and sworn to before me this 18th day of October,
2006.
Notary Public: Erica Kuhlmeier

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
 UIC Distribution

RECEIVED
OCT 19 2006

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Operator Name: American Warrior, Inc. Lease Name: Alexander Well #: 1-10
 Sec. 10 Twp. 32 S. R. 15 East West County: Barber

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Gamma Ray/Neutron Log; Sonic Cement Bond Log,

Name	Top	Datum
Stalnaker Sand	4238	-2275
Lansing	4252	-2289
BKC	4673	-2710
Mississippian	4842	-2879
Chouteau	4954	-2991
Kinderhook Shalle	4974	-3011
Viola	5020	-3057
Arbuckle	5161	-3198

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 #	312'	Class A	250 sx	2% cc; 2% gel
Production Pipe	7-7/8"	4-1/2"	10.5#	5215'	SMDC	200 SX	FLOCELE

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	OH 5215' to 5275'	1000 GAL 20% MCA & 20% FE	Same

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	5192'	5196'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method			
Shut In	<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.	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)

Production Interval

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

TICKET
 N° 9987

PAGE 1 OF 2

1. SERVICE LOCATIONS NESS CITY, KS	WELL/PROJECT NO. i-10	LEASE ALEXANDER	COUNTY/PARISH BARBER	STATE KS	CITY	DATE 3-12-06	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR DUKE DRILL #7	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE DISPOSAL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 4 1/2" LONGSTRE 26	WELL PERMIT NO.	WELL LOCATION 160 - SW 2nd CITY RD, '125, ES		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 104	120		MI		4.00	480.00
578		1			PUMP SERVICE	1		JOB	5214 FT	1250.00	1250.00
281		1			MUD FLUSH	500		GA		75	375.00
402		1			CEMENTALS	8		CA	4 1/2"	50.00	400.00
403		1			CEMENT BASKETS	2		EA		230.00	460.00
405		1			FORMATED PACKERSHOE	1		CA		1400.00	1400.00
406		1			LATCH DOWN PLUG - BAFFLE	1		CA		190.00	190.00
RECEIVED APR 19 2006 RCC WICHITA											

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 *Kenneth McNamee*
 DATE SIGNED **3-12-06** TIME SIGNED **0400**
 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	4559.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	3920.70
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				Subtotal	8475.70
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			Barber 6.3%	335.63
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	8811.33

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR *Wade Wilson* APPROVAL

Thank You!



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

TICKET CONTINUATION

TICKET No. 9987

CUSTOMER: AMERICAN WARRIOR INC
WELL: ALEXANDER 1-10
DATE: 3-12-06
PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT								
		LOC	ACCT	DF																
330		1				SWIFT MULTI-DENSITY STANDARD	200	EGS			12.00	2400.00								
276		1				FLOCELE	50	UBS			1.25	62.50								
290		1				D-ADR	2	GAL			20.00	40.00								
<p>RECEIVED OCT 19 2006 KCC WICHITA</p>																				
581		1				SERVICE CHARGE	CUBIC FEET		200		1.10	220.00								
583		1				<table border="1" style="font-size: small;"> <tr> <td>MIFFAGE CHARGE</td> <td>TOTAL WEIGHT</td> <td>LOADED MILES</td> <td>TON MILES</td> </tr> <tr> <td></td> <td>19970</td> <td>120</td> <td></td> </tr> </table>	MIFFAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES		19970	120		TON MILES		1198.20		1.00	1198.20
MIFFAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES																	
	19970	120																		

CONTINUATION TOTAL
3920.70

JOB LOG

SWIFT Services, Inc.

DATE 3-12-06 PAGE NO. 7

CUSTOMER AMERICAN WARRIOR DR WELL NO. 1-10 LEASE ALEXANDER JOB TYPE 4 1/2" LONGSTRENG TICKET NO. 9987

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0330							ON LOCATION
	0630							START 4 1/2" CASING ON WELL
								TD - 5275' SET 5214'
								TP - 5214' 4 1/2" #15 10.5
								ST - 17'
								CENTRALIZERS - 1, 3, 5, 7, 10, 14, 17, 20
								CMT BKTS - 4, 8
	0845							BREAK CIRCULATION
	0900						1250	DROP BALL - SET PARKSHOE
	0925	6	12				550	PUMP 500 GAL MUDFLUSH
	0930		4 1/2					PLUG RT MH
	0940	5	73				350	MIX CEMENT - 200 SKS SMD W/FLOCCLE
	0954							WASH OUT PUMP & LINES
	0955							RELEASE LATCH DOWN PLUG
	0957	6 1/2	0					DESURE PLUG
		6 1/2	80				900	
	1010	6	82.6				1750	PLUG DOWN - SET UP LATCHED PLUG
	1012						OK	RELEASE SET-HELD
								WASH UP
								RECEIVED
								OCT 19 2006
	1130							JOB COMPLETE
								KCC WICHITA
								THANK YOU
								WANE, JASON, ROB

ALLIED CEMENTING CO., INC. 23172

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

SERVICE POINT:
MEDICINE LODGE

DATE <u>3-2-06</u>	SEC. <u>10</u>	TWP. <u>32S</u>	RANGE <u>15W</u>	CALLED OUT <u>8:30 am</u>	ON LOCATION <u>11:00 am</u>	JOB START <u>12:15 pm</u>	JOB FINISH <u>1:15 pm</u>
ALEXANDER LEASE		WELL # <u>1-10</u>	LOCATION <u>160 2 DEERHEAD RD., 15, 12W</u>			COUNTY <u>BARBER</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)			<u>INTD.</u>				

CONTRACTOR DUKE EY

TYPE OF JOB SURFACE CASING

HOLE SIZE 12 1/4" T.D. 312'

CASING SIZE 8 5/8" DEPTH 312'

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 250 MINIMUM 50

MEAS. LINE _____ SHOE JOINT 15'

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 18 3/4 BBL. FRESH WATER

OWNER AMERICAN WARRIOR

CEMENT

AMOUNT ORDERED 250 SK CLASS A + 2% CC + 2% GEL + 1% AM. CHLOR.

COMMON	<u>250 A</u>	@	<u>9.60</u>	<u>2400.00</u>
POZMIX		@		
GEL	<u>5</u>	@	<u>15.00</u>	<u>75.00</u>
CHLORIDE	<u>6</u>	@	<u>42.00</u>	<u>252.00</u>
ASC		@		
Ammonium Chloride	<u>5</u>	@	<u>36.30</u>	<u>181.50</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>266</u>	@	<u>1.70</u>	<u>452.20</u>
MILEAGE	<u>20 x 266 x .07</u>			<u>372.40</u>
TOTAL				<u>3733.10</u>

EQUIPMENT

PUMP TRUCK CEMENTER BILL M.

360 HELPER DWAYNE W.

BULK TRUCK JASON K.

356 DRIVER GREGORY G.

BULK TRUCK _____

_____ DRIVER _____

REMARKS:

PIPE ON BOTTOM, BREAK CIRCULATION, PUMP PRE-FLUSH, PUMP 250 SK CLASS A + 2% CC + 2% GEL + 1% AM. CHLOR., STOP PUMPS, RELEASE PLUG, START DISPLACEMENT, DISPLACE 18 3/4 BBL., STOP PUMP, SHUT-W, CIRCULATED CEMENT.

SERVICE

DEPTH OF JOB	<u>312'</u>			
PUMP TRUCK CHARGE	<u>0-300'</u>			<u>735.00</u>
EXTRA FOOTAGE	<u>12'</u>	@	<u>.60</u>	<u>7.20</u>
MILEAGE	<u>20</u>	@	<u>5.00</u>	<u>100.00</u>
MANIFOLD <u>NEW RENT</u>		@	<u>80.00</u>	<u>80.00</u>
		@		
		@		
TOTAL				<u>922.20</u>

CHARGE TO: AMERICAN WARRIOR

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>8 5/8" WOODEN PLUG</u>	<u>1</u>	@	<u>55.00</u>	<u>55.00</u>
		@		
		@		
		@		
		@		

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

TOTAL 55.00

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 Kenneth McGuire

KENNETH MCGUIRE
PRINTED NAME

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