

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

AMENDED

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 # 5822

Name: Val Energy, Inc.

Wellsite Geologist: Jason Alm

Purchaser: _____

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.: _____

07/17/2008 07/25/2008 08/29/2008

Spud Date or Date Reached TD Completion Date or

Recompletion Date Recompletion Date

API No. 15 - 135-24796-0000

Spot Description: 140' S & 175' E NW NW SE

SE NW NW SE Sec. 12 Twp. 20 S. R. 21 East West

2170 Feet from North / South Line of Section

2135 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Ness

Lease Name: R Hinnergardt Well #: 1

Field Name: Ben

Producing Formation: Mississippian

Elevation: Ground: 2233' Kelly Bushing: 2238'

Total Depth: 4384.5' Plug Back Total Depth: NA

Amount of Surface Pipe Set and Cemented at: 224 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1402 Feet

If Alternate II completion, cement circulated from: 1402

feet depth to: surface w/ 125 ^{sx cmt.}

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: _____

Title: Petroleum Engineer Date: 09/11/2009

Subscribed and sworn to before me this 11th day of September

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

N Letter of Confidentiality Received
If Denied, Yes Date: _____

_____ Wireline Log Received
_____ Geologist Report Received **RECEIVED**
_____ UIC Distribution **KANSAS CORPORATION COMMISSION**

SEP 23 2009

Operator Name: American Warrior, Inc. Lease Name: R Hinnergardt Well #: 1
 Sec. 12 Twp. 20 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 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:

Dual Induction, Compensated Neutron Density

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Anhydrite	1432	+806
Heebner	3756	-1518
Lansing	3804	-1566
BKC	4132	-1894
Ft. Scott	4292	-2054
Cherokee	4312	-2074
Mississippian	4359	-2142

CASING RECORD New 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	224'	Common	160	2% gel, 3% CC
Production	7 7/8"	5 1/2"	15.5	4379'	EA-2	150	

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	Surface/1402	SMD	125	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	4367.5'-4384'	350 gallon of 20% DSFE	4367.5-77.5

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run:
		2 3/8	4360'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 08-29-2008			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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	15		5		

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<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) _____	4367.5'-4380': Perfs 4380-84.5': open hole