

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

12/12/08

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: N/A
Operator Contact Person: Joe Smith
Phone: (620) 275-2963
Contractor: Name: Discovery Drilling Co., Inc.
License: 31548
Wellsite Geologist: Mark Downing

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

10-9-06	10-14-06	10-30-06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 163-23,559-00-00
County: Rooks
C NW SW Sec. 5 Twp. 10 S. R. 20 East West
2000 FSL feet from S / N (circle one) Line of Section
675 FWL feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: ROBERTSON Well #: 11
Field Name: Marcotte

Producing Formation: Arbuckle
Elevation: Ground: 2266' Kelly Bushing: 2274'
Total Depth: 3963' Plug Back Total Depth: 3918'
Amount of Surface Pipe Set and Cemented at 212.06' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1761 Feet
If Alternate II completion, cement circulated from 1761'
feet depth to Surface w/ 145 sx cmt.

Drilling Fluid Management Plan AKI NH 8-20-08
(Data must be collected from the Reserve Pit)

Chloride content 16,000 ppm Fluid volume 300 bbls
Dewatering method used Evaporation

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: 12-12-06

Subscribed and sworn to before me this 12th day of December,
20 06.

Notary Public: [Signature]
Date Commission Expires: 09-12-09

ERICA KUHLMIEIER
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

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Operator Name: American Warrior, Inc. Lease Name: ROBERTSON Well #: 11
 Sec. 5 Twp. 10 S. R. 20 East West County: Rooks DEC 12 2008

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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:

Borehole Compensated Sonic Log, Dual
 Compensated Porosity Log, Microresistivity Log, Dual
 Induction Log, Sector Bond/Gamma Ray CCL Log

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Base Anhydrite	1805	-469
Topeka	3302	-1028
Heebner	3508	-1238
Toronto	3532	-1258
LKC	3548	-1274
BKC	3769	-1495
Coglomerate Sand	3810	-1536
Arbuckle	3854	-1580

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"	20#	212.06'	Common	150 sx	3% cc 2% gel
Production Pipe	7-7/8"	5-1/2'	14#	3959.99'	EA/2	150 sx	

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				

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	3864' to 3867'		

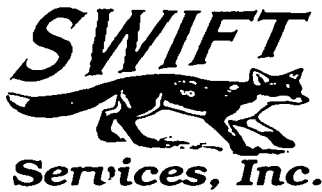
TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	3915'	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method		
SI			<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> 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 Inc*
 ADDRESS:
 CITY, STATE, ZIP CODE:

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TICKET No 10805

PAGE 1 OF 2

SERVICE LOCATIONS
 1. *Hays Ks*
 2. *Ness City Ks*
 3.
 4.

WELL/PROJECT NO. *#11* LEASE *Robertson* COUNTY/PARISH *Rooks* STATE *Ks* CITY DATE *10-15-06* OWNER *Some*

TICKET TYPE SERVICE SALES CONTRACTOR *Discovery Drilling #1* RIG NAME/NO. SHIPPED VIA *et* DELIVERED TO *Location* ORDER NO.

WELL TYPE *oil* WELL CATEGORY *Development* JOB PURPOSE *Cement Logging* 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 #103	40				4.00	160.00
578		1			Pump Charge (Logging)	1	ea	4066	'	1250.00	7250.00
281		1			Mud Flush	500	gal			75	375.00
221		1			KCL	2	gal			26.00	52.00
407		1			Insert Float Shoe w/fill	1	ea	5 1/2"		310.00	310.00
406		1			L.D. Plug & Baffle	1	ea			235.00	235.00
402	RECEIVED DEC 15 2006 KCC WICHITA	1			Centralizers	7	ea			80.00	560.00
403		1			Basket	1	ea			280.00	280.00
404		1			Port Collar	1	ea			2300.00	2300.00

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 *10-15-06* TIME SIGNED *1045* 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
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			

PAGE TOTAL 1	5522.00
page 2	2893.95
subtotal	8415.95
Rooks TAX 5.3%	341.82
TOTAL	8757.77



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

TICKET CONTINUATION

TICKET No. 10865

CUSTOMER *American Warrior Inc* WELL # *11 Roberton* DATE *10-15-06* PAGE *2* OF *2*

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QUANTITY				UNIT PRICE	AMOUNT
		LOC	ACCT	DF			QTY.	UM	QTY.	UM		
<i>325</i>		<i>2</i>				<i>Standard Cement</i>	<i>150</i>	<i>sk</i>			<i>11⁰⁰</i>	<i>1650⁰⁰</i>
<i>284</i>		<i>2</i>				<i>Calseal</i>	<i>7</i>	<i>sk</i>			<i>30⁰⁰</i>	<i>210⁰⁰</i>
<i>283</i>		<i>2</i>				<i>Salt</i>	<i>750</i>	<i>#</i>			<i>20</i>	<i>150⁰⁰</i>
<i>285</i>		<i>2</i>				<i>CFR-1</i>	<i>70</i>	<i>#</i>			<i>4⁰⁰</i>	<i>280⁰⁰</i>
<i>276</i>		<i>2</i>				<i>Flaccle</i>	<i>38</i>	<i>#</i>			<i>1²⁵</i>	<i>47⁵⁰</i>
<i>581</i>		<i>2</i>				SERVICE CHARGE	<i>150</i>	<i>sk</i>			<i>1¹⁰</i>	<i>165⁰⁰</i>
<i>583</i>		<i>2</i>				RELEASE CHARGE					<i>1⁰⁰</i>	<i>391⁴⁵</i>
						TOTAL WEIGHT			LOADED MILES			
							<i>15658</i>		<i>50</i>			
												<i>391.45</i>

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CONTINUATION TOTAL *2893.95*

JOB LOG

SWIFT Services, Inc.

DATE 10-15-06 PAGE NO. 1

CUSTOMER American Warrior Tr.o. WELL NO. 411 LEASE Robertson JOB TYPE Cement Longstring TICKET NO. 10805

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0600							on loc w/FE
	0830							Trk seat loc
								5 1/2" x 14# x 4066' x 35' 5J
								Cent. 1, 3, 5, 7, 9, 11, 52
								Basket 53
								Port Collar 53 @ 176'
								Joints 61, 96 out
	0805							start F.E.
	0925							Brk circ.
	0955	2.5	3 1/2					Plug RH & MH
	1000	4	0			100		start Pre Flushes 500 gal Mud Flush 20 bbl KCC Flush
	1008	6	32/0			200		start Cement
	1013		32					End Cement
								Wash P&L
								Drop Plug
	1016	6.5	0			150		start Displacement
	1027	6	71			200		Catch Cement
	1031		98.5			700/1200		Land Plug
								Release Pressure
								Float Hold

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Thank you
 Nick Sash & Shane

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CHARGE TO: *American Warrior Inc*

ADDRESS:

CITY, STATE, ZIP CODE:

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TICKET N^o 10815

PAGE 1 OF 1

SERVICE LOCATIONS 1. <i>Hays, Ks</i> 2. <i>Ness City, Ks</i>	WELL/PROJECT NO. #11	LEASE <i>Robertson</i>	COUNTY/PARISH <i>Rooks</i>	STATE <i>Ks</i>	CITY	DATE <i>10-23-06</i>	OWNER <i>Same</i>
	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>Express Well Service</i>	RIG NAME/NO.	SHIPPED VIA <i>CTT</i>	DELIVERED TO <i>Location</i>	ORDER NO.	
	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cement 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 #103	48	mi			4.00	160.00
578		1			Pump Charge (Part Collar)	1	ea	1761		1250.00	1250.00
330		2			SMD	145	stks			13.50	1957.50
276		2			Flocate	36	#			1.25	45.00
581		2			Cement Service Charge	175	stks			1.10	192.50
583		2			Drayage	342	STK			1.00	342.00

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

By Nick Korbe

X Joe Smith

DATE SIGNED: *10-23-06* TIME SIGNED: *1030* 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?				3947.88
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			Rooks TAX 5.3% 106.13
<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: *Nick Korbe* APPROVAL:

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 10-23-06 PAGE NO. 7

CUSTOMER American Wellpac Inc. WELL NO. #11 LEASE Robertson JOB TYPE Cement Seal Cellar TICKET NO. 10815

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0949							order setup tanks
								2 3/8" x 5 1/2" x 1761' P.C.
								Locate P.C.
	0920					1000		Test csg
								Open P.C.
	0925	3.5	4			250		Take Injection rate
	0930	4	0			250		start cement
		4	75			450		circulating cement
		4	78/0			450		start displacement
	0950		6					cement displaced
								Close P.C.
	0954					900		Test Csg
								Run 3 jts
	1000	3	0				150	Reverse out
	1005		15'					Hole Clean

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Thank you

Nick, Josh, Shane, & Ryan

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ALLIED CEMENTING CO., INC. 21067

P.O. BOX 31
 RUSSELL, KANSAS 67665

SERVICE POINT
Russell

DATE <i>10-9-06</i>	SEC. <i>5</i>	TWP. <i>10</i>	RANGE <i>20</i>	CALLED OUT <i>NOON</i>	ON LOCATION <i>3:30 PM</i>	JOB START	JOB FINISH <i>5:00 PM</i>
LEASE <i>Rejection</i>	WELL # <i>11</i>	LOCATION <i>Palco 281w 3.5</i>			COUNTY <i>Rooks</i>	STATE <i>Ks</i>	
OLD OR NEW (Circle one)							

CONTRACTOR *Discerny #1* OWNER _____

TYPE OF JOB *Surface*

HOLE SIZE *12 1/2* T.D. *212* CEMENT AMOUNT ORDERED _____

CASING SIZE *8 1/2* DEPTH _____

TUBING SIZE DEPTH _____

DRILL PIPE DEPTH _____

TOOL DEPTH _____

PRES. MAX MINIMUM COMMON *150* @ *10 1/2* *1597 80*

MEAS. LINE SHOE JOINT POZMIX @ _____

CEMENT LEFT IN CSG. *15'* GEL @ *16 1/2* *19 85*

PERFS. CHLORIDE *5* @ *4 1/2* *233 80*

DISPLACEMENT *125 bbl* ASC @ _____

EQUIPMENT @ _____

PUMP TRUCK CEMENTER *Bill* @ _____

409 HELPER *MARK* @ _____

BULK TRUCK @ _____

DRIVER *Blanken - Aikin* @ _____

BULK TRUCK @ _____

DRIVER @ _____

HANDLING *150* @ *1 1/2* *300 20*
 MILEAGE *97/5K/mile* @ *1 1/2* *853 80*
 TOTAL *3033 80*

REMARKS:

Ran 5 Hr of 8 1/2 port c 211
Cent of 150th 3.2
pump plus 12 bbl of water
Cent did fine.

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE *816 00*

EXTRA FOOTAGE @ _____

MILEAGE *60* @ *6 00* *360 00*

MANIFOLD @ _____

@ _____

@ _____

TOTAL *1176 00*

CHARGE TO: *American Western Inc.*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE *Cliff Mayhall*

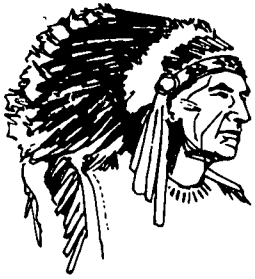
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Date: 12-12-06

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Kansas Corporation Commission
Finney State Office Building
130 S. Market, Room 2078
Wichita, Kansas 67202-3802

RE: Well Robertson II

Dear Corporation Commission,

American Warrior, Inc. request that you please hold the enclosed information confidential for as long as the law allows.

Sincerely,

Nancy E. Davis
Compliance Coordinator

NED

Enclosure

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American Warrior, Inc.
P.O. Box 399 • Garden City, Kansas 67846 • (620) 275-9231