

KCC OIL/GAS REGULATORY OFFICES

Date: 10/07/09

District: 01

Case #: _____

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 4058

API Well Number: 15-083-21,606-00-00

Op Name: American Warrior

Spot: NE-SE-SW-SW Sec 23 Twp 21 S Rng 25 E / W

Address 1: P.O. Box 399

335 Feet from N / S Line of Section

Address 2: P.O. Box 783188

1200 Feet from E / W Line of Section

City: Garden City

GPS: Lat: 38.20439 Long: 100.04167 Date: 10/7/09

State: Kansas Zip Code: 67846 -0399

Lease Name: Cure Well #: 3-23

Operator Phone #: (620) 587-3224

County: Hodgeman

Reason for Investigation:

Witness Alt.II

Problem:

None, cement circulated to surface

Persons Contacted:

Findings:

8-5/8" @ 224W/150sxs cement
TD @ 4563'
5-1/2" @ 4562'W/125sxs cement
Port Collar @ 1657' cemented with 130sxs-smd-1/4# flo seal-2%cc-15sxs went to pit

Action/Recommendations:

Follow Up Required Yes No

Date: _____

Alt.II requirements have been met

RECEIVED
OCT 13 2009

RECEIVED
OCT 15 2009
KCC WICHITA

KCC DODGE CITY

Verification Sources:

Photos Taken: _____

<input type="checkbox"/> RBDMS	<input type="checkbox"/> KGS	<input type="checkbox"/> TA Program
<input type="checkbox"/> T-I Database	<input checked="" type="checkbox"/> District Files	<input type="checkbox"/> Courthouse
<input type="checkbox"/> Other: _____		

By: Michael Maier

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

Form: 02/22/2008

Date: 10/07/09

District: 01

License #: 4058

Op Name: 4058

Spot: NE-SE-SW-SW Sec 23 Twp 21 S Rng 25 E W

County: Hodgeman

Lease Name: Cure Well #: 3-23

I.D. Sign Yes No

Tank Battery Condition
Condition: Good Questionable Overflowing

Pits, Injection Site
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Oil Spill Evidence

Abandoned Well Potential Pollution Problem Yes No

Lease Cleanliness
 Very Good Satisfactory Poor Very Bad

Gas Venting Yes No

Pits
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Saltwater Pipelines
Leaks Visible: Y N Tested for Leaks: Y N

Flowing Holes

TA Wells

Monitoring Records

SWD/ER Injection Well Yes No Hodgeman

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Gauge Connections Yes No

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

API Number	Footages	Spot Location	GPS	Well #	Well Status
15-083-21.606-00-00	335FSL 1200FWL	NE-SE-SW-SW	38.20439-100.04167	3-2	New well, Alt. II completed

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