

KCC OIL/GAS REGULATORY OFFICES

Date: 08/14/09

District: 01

Case #: _____

- New Situation
 Response to Request
 Follow-Up

- Lease Inspection
 Complaint
 Field Report

Operator License No: 4058

API Well Number: 15-135-24,937-00-00

Op Name: American Warrior

Spot: NW-SE-SE-SW Sec 23 Twp 19 S Rng 22 E / W

Address 1: P.O. Box 399

640 Feet from N / S Line of Section

Address 2: P.O. Box 783188

2100 Feet from E / W Line of Section

City: Garden City

GPS: Lat: _____ Long: _____ Date: 8/14/09

State: Kansas Zip Code: 67846 -0399

Lease Name: Obrate Well #: 3

Operator Phone #: (620) 587-3224

County: Ness

Reason for Investigation:

Witness Alt.II

Problem:

None, cement circulated to surface

Persons Contacted:

Findings:

8-5/8" @ 224W/150sxs cement
TD @ 4375'
5-1/2" @ 4374'W/165sxs cement
Port Collar @ 1461' cemented with 140sxs-smd-1/4# flo seal-2%cc-15sxs went to pit

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KCC WICHITA

Action/Recommendations:

Follow Up Required Yes No

Date: _____

Alt.II requirements have been met

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SEP - 9 2009

KCC DODGE CITY

Verification Sources:

- RBDMS KGS TA Program
 T-I Database District Files Courthouse
 Other: _____

Photos Taken: _____

By: Michael Maier

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

Form: 02/22/2008

Date: 08/14/09

District: 01

License #: 4058

Op Name: 4058

Spot: NW-SE-SE-SW Sec 23 Twp 19 S Rng 22 E W

County: Ness

Lease Name: Obrate Well #: 3

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 Ness

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
15-135-24,937-00-00	640FSL 2100FWL	NW-SE-SE-SW		3	New well, Alt.II completed

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