

**CONFIDENTIAL**

*Ken  
12/03/08*

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**WELL COMPLETION FORM**

**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

**ORIGINAL**

11/17/09  
Form AGO-1  
September 1999  
Form Must Be Typed

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

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Contractor: Name: Duke Drilling Co., Inc.

License: 5929

NOV 17 2008

Wellsite Geologist: James Dilts

KGB

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. \_\_\_\_\_

8-5-08	8-15-08	12-1-08
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-23,331-0000

County: Barber

NE SW SW SW Sec. 33 Twp. 31 S. R. 15  East  West

515 FSL feet from S / N (circle one) Line of Section

405 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: Marsh Well #: 1

Field Name: Wildcat

Producing Formation: Miss.

Elevation: Ground: 1989' Kelly Bushing: 2002'

Total Depth: 4982' Plug Back Total Depth: 4950'

Amount of Surface Pipe Set and Cemented at 235 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** *ATTN: J22509*  
(Data must be collected from the Reserve Pit)

Chloride content 12,000 ppm Fluid volume 300 bbls

Dewatering method used HAULED OFF SITE

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: AMERICAN WARRIOR, INC

Lease Name: ALEXANDER 1-10 License No.: 4058

Quarter SE Sec. 10 Twp. 32 S. R. 15  East  West

County: BARBER Docket No.: D-28,670

**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: 11-17-08

Subscribed and sworn to before me this 17 day of November

20 08.

Notary Public: *[Signature]*

Date Commission Expires: 09/20/09

**ERICA KUHLMAYER**  
Notary Public - State of Kansas  
My Appt. Expires 09/20/09

**KCC Office Use ONLY**

Letter of Confidentiality Received

If Denied, Yes  Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

**RECEIVED**  
KANSAS CORPORATION COMMISSION

**DEC 02 2008**

Operator Name: American Warrior, Inc. Lease Name: Marsh Well #: 1  
 Sec. 33 Twp. 31 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:

Sonic Cement Bond Log; Dual Compensated Porosity Log; Microresistivity Log; Dual Induction Log; Borehole Compensated Sonic Log

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum  
 No Geo Report Jim Dilts, Geologist

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KCC

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	14-3/4"	10-3/4"	32#	230'	60/40 poz	225 sx	3% cc & 2% Gel
Production Pipe	7-7/8"	5-1/2"	15.5#	4981'	AA2	165 sx	10% salt

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	Depth
4	4254' to 4258'	24,000#'S 30/50 SAND	Same
		IN NITROGEN FOAMED GEL	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-7/8"	4238'	4240'	<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

METHOD OF COMPLETION

Production Interval

Vented  Sold  Used on Lease  
 (If vented, Submit ACO-18.)

Open Hole  Perf.  Dually Comp.  Commingled  
 Other (Specify)

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 KANSAS CORPORATION COMMISSION

DEC 02 2008

CONSERVATION DIVISION  
 WICHITA, KS

NOV 17 2008

Customer AMERICAN WARRIOR INC.	Lease No. RCR	Date 8-15-08			
Lease MARSH	Well # 1				
Field Order # 13701	Station PRATT, KS-1970	Casing 5 1/2	Depth 4982	County BARBER	State KS
Type Job CNW-5 1/2 L.S.	Formation	Legal Description 33-31-15			

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 5 1/2	Tubing Size	Shots/Ft	CMT-165	Acid AAZ @ 1.44 c/Ft	3	RATE	PRESS	ISIP
Depth 4982	Depth	From	To	Pre Pad	Max			5 Min.
Volume 118	Volume	From	To	Pad	Min			10 Min.
Max Press 1500	Max Press	From	To	Frac	Avg			15 Min.
Well Connection P.C.	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth 2457	Packer Depth	From	To	Flush 118 BBL	Gas Volume			Total Load

Customer Representative KEVIN WILES	Station Manager DAVE SCOTT	Treater ROBERT SULLIVAN							
Service Units 19867	19839	19842	19831	19810					
Driver Names SULLIVAN	LESLEY	SHIELDS	FREEMAN						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
12:00 PM					ON LOCATION - SAFETY MEETING
					RUN CSG - CENT. - 2, 3, 16, 16, 17 BASKET - 5
0215					CSG ON BOTTOM
0230					HOOK UP TO CSG - BREAK CIRC. W/ RIG
0315	100		24	6	SUPER FLUSH II
			3	6	H2O
			42	5.5	MIX CMT-AAZ-165SK @ 15.0#/90.
0333					SHUT DOWN - CLEAR PUMP & LINE
0335	100			7	START DISPLACEMENT
	250		90	6	LIFT PRESSURE
	500			5	SLOW RATE
0355	1500		118	4	PLUG DOWN & HELD
			7		PLUG R.H.

JOB COMPLETE

THANKS,  
ROBERT  
SULLIVAN

Customer: **AMERICAN LORRICA, INC.** Lease No: \_\_\_\_\_ Date: \_\_\_\_\_  
 Well #: \_\_\_\_\_  
 Field Order #: \_\_\_\_\_ Station: **PRATT, KS 1570** Casing: **5 1/2** Depth: **1962** County: **DARBER** State: **Ks.**  
 Type Job: **CNW 15 1/2 C.S.** Formation: \_\_\_\_\_ Legal Description: **33-31-15**

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size: <b>5 1/2</b>	Tubing Size: _____	Shots/Ft: _____	From: _____	To: _____	Acid: <b>5% AAZ @ 1.44 cft</b>	RATE: _____	PRESS: _____
Depth: <b>1962</b>	Depth: _____	From: _____	From: _____	To: _____	Pre Pad: _____	Max: _____	ISIP: <b>5 Min.</b>
Volume: <b>118</b>	Volume: _____	From: _____	From: _____	To: _____	Pad: _____	Min: _____	10 Min: _____
Max Press: <b>1500</b>	Max Press: _____	From: _____	From: _____	To: _____	Frac: _____	Avg: _____	15 Min: _____
Well Connection: <b>1.0</b>	Annulus Vol: _____	From: _____	From: _____	To: _____	Flush: <b>118 BFL</b>	HHP Used: _____	Annulus Pressure: _____
Plug Depth: <b>1157</b>	Packer Depth: _____	From: _____	From: _____	To: _____	Gas Volume: _____	Total Load: _____	

Customer Representative: **KEVIN WILES** Station Manager: **DAVE SCOTT** Treater: **ROBERT SULLIVAN**

Service Units: **1962** **1962** **1962**

Driver Names: **SULLIVAN** **LESLEY** **SCHEM**

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
12:00pm					COMMUNICATION - SAFETY MEETING
0215					RUN CSQ - CENT. 2, 3, 16, 17 BASKET - 5
0230					CSQ ON BOTTOM
0315	100		04	6	HOOK UP TO CSQ. BREAK CIRC. W/ RIG
			3	6	SUPER FLUSH II
			42	5.5	H2O
0333					MIX CAT. AAZ - 165SR @ 15.0 / 90.
0335					SHUT DOWN. CLEAR TUMPT. LINE
	250		90	6	START DISPENSING
	500			5	LIFT PRESSURE
0355	1500		118	4	SLOW RATE
			7		PLUG DOWN & HELD
					PLUG R.H.
					JOB COMPLETE

*[Handwritten signature]*  
*[Handwritten signature]*

# ALLIED CEMENTING CO., LLC. 32313

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

SERVICE POINT: Medicine Lodge

DATE <u>8-5-08</u>	SEC. <u>33</u>	TWP. <u>31s</u>	RANGE <u>15W</u>	CALLED OUT <u>11:30 AM</u>	ON LOCATION <u>12:15 PM</u>	JOB START <u>3:00 PM</u>	JOB FINISH <u>4:00 PM</u>
LEASE <u>Maesh</u>	WELL # <u>1</u>	LOCATION <u>West on 160<sup>th</sup> to Sun City Rd. 2 3/4 west 1 1/2 N/E</u>			COUNTY <u>Barber</u>	STATE <u>Ks.</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Duke #9

TYPE OF JOB Surface

HOLE SIZE 10 3/4 T.D. 230

CASING SIZE 10 3/4 DEPTH 230

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 300 MINIMUM —

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 20

PERFS.

DISPLACEMENT 21 Bbls Freshwater

OWNER American Warrior

CEMENT AMOUNT ORDERED 225 ex 60:40:2+3%cc

EQUIPMENT

PUMP TRUCK # 343 CEMENTER Carl Balding  
HELPER Mike Becker

BULK TRUCK # 353 DRIVER Michael N.

BULK TRUCK # DRIVER Matt T.

COMMON	<u>135 A</u>	@	<u>15.45</u>	<u>2085.75</u>
POZMIX	<u>90</u>	@	<u>8.00</u>	<u>720.00</u>
GEL	<u>4</u>	@	<u>20.80</u>	<u>83.20</u>
CHLORIDE	<u>7</u>	@	<u>58.20</u>	<u>407.40</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>236</u>	@	<u>2.40</u>	<u>566.40</u>
MILEAGE	<u>25 x 236 x .10</u>			<u>590.00</u>
				TOTAL <u>4452.75</u>

REMARKS:

Run 230' 10 3/4 Casing  
Break circulation  
Mix 225 ex 60:40:2+3%cc  
Release wooden plug  
Displace with 21 Bbls water  
Leave 20' cement in casing  
+ Shut in Cement - Did circulate

SERVICE

DEPTH OF JOB	<u>230'</u>		
PUMP TRUCK CHARGE			<u>1018.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>25</u>	@	<u>7.00</u>
MANIFOLD		@	
<u>Hard Rental</u>		@	<u>113.00</u>
		@	
TOTAL <u>1306.00</u>			

CHARGE TO: American Warrior

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

10 3/4" PLUG & FLOAT EQUIPMENT

1-TWP	@	<u>62.00</u>	<u>62.00</u>
	@		
	@		
	@		
	@		
TOTAL <u>62.00</u>			

To Allied Cementing Co., LLC.  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES ~~4452.75~~

DISCOUNT ~~4452.75~~ IF PAID IN 30 DAYS

PRINTED NAME Enigdio Rojas

SIGNATURE Enigdio Rojas

**ANY APPLICABLE TAX  
WILL BE CHARGED  
UPON INVOICING**