

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4058
Name: American Warrior, Inc
Address 1: P O Box 399
Address 2: _____
City: Garden City State: KS Zip: 67846 + _____
Contact Person: Kevin Wiles, Sr
Phone: (620) 275-2963
CONTRACTOR: License # 5929
Name: Duke Drilling Co, Inc
Wellsite Geologist: Jim Dilts
Purchaser: W W G G
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
_____ Oil _____ SWD _____ SLOW _____
 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.: _____
12/03/09 12/13/09 12/21/10 09
Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

API No. 15 - 077-21, 658-0000
Spot Description: SE-NW-SW-NW
SE NW SW NW Sec. 7 Twp. 31 S. R. 7 East West
1900 Feet from North / South Line of Section
650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Harper
Lease Name: James Robb Well #: 1/17 1-7
Field Name: Wildcat
Producing Formation: Mississippi
Elevation: Ground: 1606 Kelly Bushing: 1617
Total Depth: 4840' Plug Back Total Depth: 4425'
Amount of Surface Pipe Set and Cemented at: 298' 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 AH I NR 2-19-10
(Data must be collected from the Reserve Pit)
Chloride content: 11,000 ppm Fluid volume: 100 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: *Bill Smith*
Title: Geologist Date: _____
Subscribed and sworn to before me this 15 day of February
20 10.
Notary Public: Caitlin Birney
Date Commission Expires: 09/10/2013

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution
RECEIVED

 **Caitlin Birney**
Notary Public - State of Kansas
My Appt. Expires 09/10/2013

FEB 17 2010
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Operator Name: American Warrior, Inc Lease Name: James Robb Well #: 1-17 1-7
 Sec. 7 Twp. 31 S. R. 7 East West County: Harper

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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	3388	-1771
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	3660	-2043
List All E. Logs Run:		KC	3890	-2273
<small>Dual Compensated Porosity/Borehole Compensated Sonic Microresistivity Dual Induction</small>		Marmaton	4144	-2527
		Mississippi	4386	-2769
		Viola	4782	-3165
		Simpson	4796	-3179

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	12-1/4"	8-5/8"	24#	298'	60/40 POZ	200	3%cc 2%gel
PRODUCTION	7-7/8"	5.5"	15.5# 17#	4520'	AA2	175	

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	4388'-4392'		SAME

TUBING RECORD: Size: <u>2-3/8"</u> Set At: <u>4486'</u> Packer At: <u>NONE</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. SHUT IN	Producing Method: <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. <u>N/A</u>	Gas Mcf <u>N/A</u> Water Bbls. <u>N/A</u> Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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Customer <i>AMERICAN WARRIOR</i>		Lease No.		Date <i>12-14-09</i>	
Lease <i>JAMES LOBB</i>		Well # <i>1-7</i>			
Field Order # <i>1096</i>	Station <i>PRATT</i>	Casing <i>5 1/2</i>	Depth <i>7520'</i>	County <i>HARPER</i>	State <i>KS</i>
Type Job <i>CNW 5 1/2" Laying</i>			Formation	Legal Description <i>7-31-7</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
<i>3 1/2</i>				Pre Pad		Max		5 Min.
Depth <i>7520</i>	Depth	From	To	Pad		Min		10 Min.
Volume <i>106</i>	Volume	From	To	Frac		Avg		15 Min.
Max Press <i>2000</i>	Max Press	From	To			HHP Used		Annulus Pressure
Well Connection <i>P.C.</i>	Annulus Vol.	From	To	Flush		Gas Volume		Total Load
Plug Depth <i>7993</i>	Packer Depth	From	To					

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Fullerton</i>
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Service Units	<i>19807</i>	<i>19959</i>	<i>20920</i>	<i>19826</i>	<i>19860</i>				
Driver Names	<i>Sullivan</i>	<i>Reuske</i>		<i>M. McGRAW</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>2000</i>					<i>CN to Saty meeting</i>
					<i>Run 112 505 5 1/2" 17x15 esp mixch</i>
					<i>Packer shoe @ shoe ST 27'</i>
<i>2400</i>					<i>CASING ON BOTTOM</i>
<i>1230</i>					<i>Hook Rig Break circ</i>
<i>1215</i>					<i>shut down @ DICI² BALL</i>
<i>1235</i>	<i>1200</i>				<i>Set Packer shoe w/ Rig AND circ.</i>
<i>0135</i>	<i>150</i>		<i>24</i>	<i>5</i>	<i>At Super Flush</i>
			<i>3</i>		<i>At Speed</i>
				<i>5.5</i>	<i>mix cont 175 st AH-2 @ 15 1/4" L</i>
<i>0155</i>			<i>45</i>		<i>shut down cont mix w/ pump</i>
<i>0200</i>	<i>100</i>			<i>6</i>	<i>Release Plug AND ST Dip</i>
	<i>300</i>		<i>78</i>		<i>Left Psi</i>
	<i>550</i>			<i>4</i>	<i>slow Rate</i>
<i>0220</i>	<i>1800</i>		<i>106</i>	<i>3.5</i>	<i>Plug down</i>
			<i>6</i>		<i>plug RT w/ 30sh 60psi psi</i>
					<i>Plug N.H w/ 70</i>
					<i>Job Complete</i>
					<i>Thank you!</i>

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Customer		Lease No.		Date	
Lease		Well #			
Field Order #	Station	Casing	Depth	County	State
Type Job			Formation	Legal Description	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
Depth	Depth	From	To	Pre Pad	Max		5 Min.
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative	Station Manager	Treater
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Service Units									
Driver Names									

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
					Plug came loose
					chute manifold loose
					tighten back up
					Trayed to pump plug
					Back down
					pumped 3 PM. 600 ps
					STOP ANI shut manifold
					IN plug did not load
					2nd time
					BY crewman

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BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 1086 A

DATE _____ TICKET NO. _____

DATE OF JOB 12-14-09 DISTRICT PRATT				NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:					
CUSTOMER American Warrior				LEASE JAMES ROBB 1-7 WELL NO.					
ADDRESS				COUNTY HARPER STATE KS					
CITY STATE KS				SERVICE CREW Sullivan, Roush, M. McGraw					
AUTHORIZED BY				JOB TYPE CNW 5 1/2 LUMP SUM					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
19959/20920	1 hr						12-13-09	END	1800
19826/19860	1 hr					ARRIVED AT JOB	12-13-09	END	2000
						START OPERATION	12-14-09	AM	0135
						FINISH OPERATION		PM	0220
						RELEASED	12-14-09	AM	0200
						MILES FROM STATION TO WELL			45

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA 2 cmt	SK	175		
CP 103	60/40 p02 cmt	SK	50		
CC 105	Defoamak	lb	42		
CC 111	Salt	lb	911		
CC 112	CMT Grease Reducer	lb	50		
CC 115	945-blok	lb	165		
CC 179	FLA-322	lb	83		
CC 201	Gilsonite	lb	875		
CC 155	Super Flush II	GAL	1,000		
CF 607	Latch down plug & Baffle 5 1/2	EA	1		
CF 1001	Cmt Packer shoe	EA	1		
CF 1651	Torbolize	EA	5		
CF 1901	Basket	EA	1		
E 101	Heavy Egnit Mitige	mi	90		
E 113	Bulk Delivery charge	TM	468		
E 100	Pickup mileage	m'	45		
3003	Service Safeway	EA	1		
CE 240	Blending - mixing charge	SK	225		
CE 305	Drill charge 4001-5000'	SK	1		
CE 304	Plug Control Rental	EA	1		
SUB TOTAL					
SERVICE & EQUIPMENT					%TAX ON \$
MATERIALS					%TAX ON \$
TOTAL					9,821 38

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CHEMICAL / ACID DATA:			

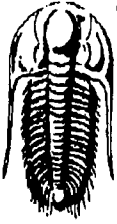
Thank you

SERVICE REPRESENTATIVE *[Signature]*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]*

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

American Warrior Inc.
P.O.Box 399
Garden City Ks.67846
ATTN: James Dilts

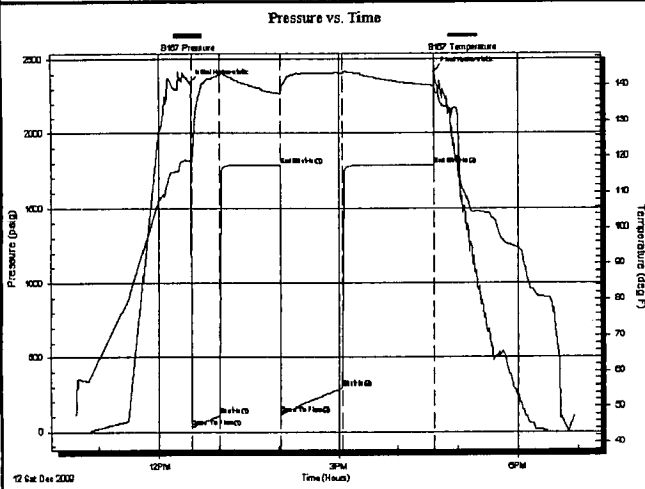
James Robb#1-7
7-31s-7w Harper Ks.
Job Ticket: 35734 **DST#: 2**
Test Start: 2009.12.12 @ 10:37:08

GENERAL INFORMATION:

Formation: **Viola**
Deviated: **No Whipstock** ft (KB)
Time Tool Opened: 12:33:08
Time Test Ended: 18:58:08
Interval: **4777.00 ft (KB) To 4792.00 ft (KB) (TVD)**
Total Depth: **4792.00 ft (KB) (TVD)**
Hole Diameter: **7.88 inches** Hole Condition: **Fair**
Test Type: **Conventional Bottom Hole**
Tester: **Gary Pevoteaux**
Unit No: **39**
Reference Elevations: **1632.00 ft (KB)**
1621.00 ft (CF)
KB to GR/CF: **11.00 ft**

Serial #: 8167 **Inside**
Press@RunDepth: **294.46 psig @ 4778.00 ft (KB)** Capacity: **7000.00 psig**
Start Date: **2009.12.12** End Date: **2009.12.12** Last Calib.: **2009.12.12**
Start Time: **10:37:13** End Time: **18:58:07** Time On Btm: **2009.12.12 @ 12:31:23**
Time Off Btm: **2009.12.12 @ 16:36:07**

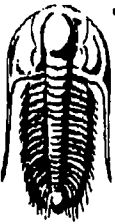
TEST COMMENT: IF:Fair to strong blow . B.O.B. in 21 mins.
IS:Weak blow . 1/2".
FF:Fair to strong blow . B.O.B. in 22 mins.
FSI:Weak blow . 1/4".



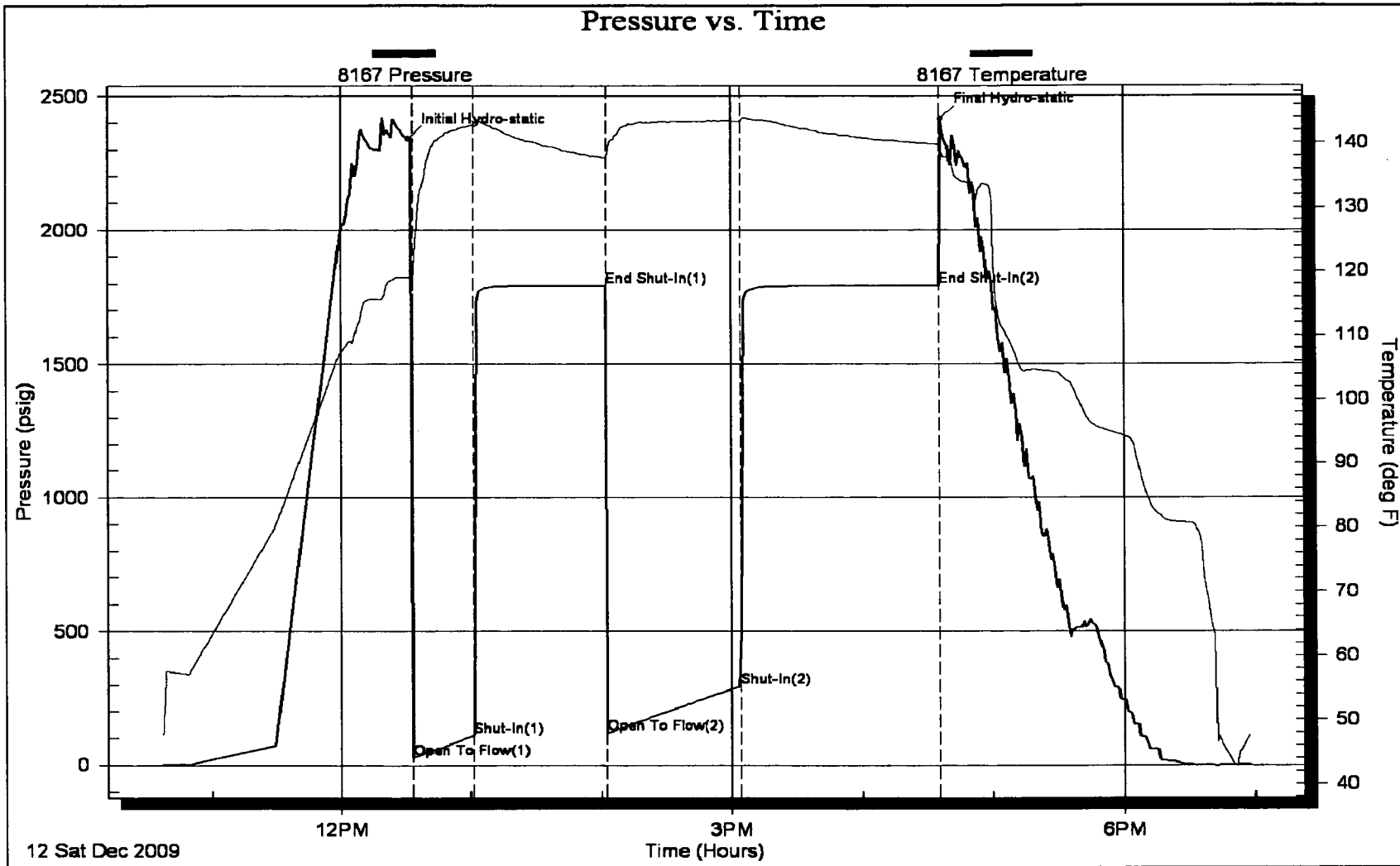
PRESSURE SUMMARY			
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2340.51	119.00	Initial Hydro-static
2	29.27	118.32	Open To Flow (1)
30	111.31	142.83	Shut-In(1)
91	1791.79	137.65	End Shut-In(1)
91	119.32	137.87	Open To Flow (2)
153	294.46	143.37	Shut-In(2)
244	1792.24	139.74	End Shut-In(2)
245	2414.75	139.64	Final Hydro-static

Recovery		
Length (ft)	Description	Volume (bbl)
375.00	SW / Rw .14 ohms @ 47 deg	5.26
105.00	MW 38% m 62% w / Trace of oil	1.47
0.00	370 ft. of GIP	0.00

Gas Rates			
	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

 <p style="font-size: 2em; font-weight: bold; margin: 0;">TRILOBITE TESTING, INC</p>	DRILL STEM TEST REPORT		FLUID SUMMARY												
	American Warrior Inc. P.O.Box 399 Garden City Ks. 67846 ATTN: James Dits	James Robb#1-7 7-31s-7w Harper Ks. Job Ticket: 35734 Test Start: 2009.12.12 @ 10:37:08		DST#: 2											
Mud and Cushion Information															
Mud Type: Gel Chem Mud Weight: 9.00 lb/gal Viscosity: 56.00 sec/qt Water Loss: 9.38 in ³ Resistivity: 0.00 ohm.m Salinity: 4000.00 ppm Filter Cake: 0.20 inches	Cushion Type: Cushion Length: ft Cushion Volume: bbl Gas Cushion Type: Gas Cushion Pressure: psig		Oil API: deg API Water Salinity: 86000ppm												
Recovery Information															
Recovery Table															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Length ft</th> <th style="width: 60%;">Description</th> <th style="width: 25%;">Volume bbl</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">375.00</td> <td>SW / Rw .14 ohms @ 47 deg</td> <td style="text-align: center;">5.260</td> </tr> <tr> <td style="text-align: center;">105.00</td> <td>MW 38% m 62% w / Trace of oil</td> <td style="text-align: center;">1.473</td> </tr> <tr> <td style="text-align: center;">0.00</td> <td>370 ft. of GIP</td> <td style="text-align: center;">0.000</td> </tr> </tbody> </table>				Length ft	Description	Volume bbl	375.00	SW / Rw .14 ohms @ 47 deg	5.260	105.00	MW 38% m 62% w / Trace of oil	1.473	0.00	370 ft. of GIP	0.000
Length ft	Description	Volume bbl													
375.00	SW / Rw .14 ohms @ 47 deg	5.260													
105.00	MW 38% m 62% w / Trace of oil	1.473													
0.00	370 ft. of GIP	0.000													
Total Length: 480.00ft		Total Volume: 6.733 bbl													
Num Fluid Samples: 0		Num Gas Bombs: 0													
Laboratory Name:		Laboratory Location:													
Recovery Comments:															
Serial #: none															

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12 Sat Dec 2009

12PM

3PM
Time (Hours)

6PM

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