

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4058
Name: American Warrior, Inc.
Address 1: PO Box 399
Address 2: _____
City: Garden City State: KS Zip: 67846 + 0399
Contact Person: Scott Corsair
Phone: (785) 398-2270
CONTRACTOR: License # 33323
Name: Petromark Drilling, LLC
Wellsite Geologist: Scott Corsair
Purchaser: NCRA
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
_____ Oil _____ SWD _____ SIOW
_____ Gas _____ ENHR _____ SIGW
_____ CM (Coal Bed Methane) _____ Temp. Abd.
 Dry _____ Other _____
(Core, WSW, Expl., Cathodic, etc.)

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FEB 25 2010
CONSERVATION DIVISION
WICHITA, KS

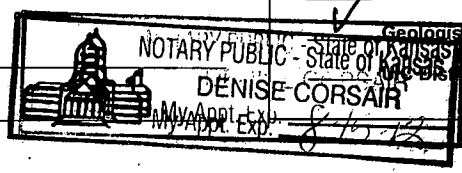
If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
_____ Deepening _____ Re-perf. _____ Conv. to Enhr. _____ Conv. to SWD
_____ Plug Back: _____ Plug Back Total Depth _____
_____ Commingled _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
09/29/2008 10/06/2008 10/06/2008
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 135-24788-00-00
Spot Description: 60' S & 10' E of S/2 NW NE
SW SE NW NE Sec. 06 Twp. 19 S. R. 21 East West
1050 Feet from North / South Line of Section
1970 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ness
Lease Name: V Strecker Well #: 2-6
Field Name: DeWald North
Producing Formation: Mississippian
Elevation: Ground: 2182' Kelly Bushing: 2188'
Total Depth: 4293' Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at: 225 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 P+A AH II NCL
(Data must be collected from the Reserve Pit) 3-3-10
Chloride content: 42,000 ppm Fluid volume: 300 bbls
Dewatering method used: evaporate
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: _____
Title: Petroleum Engineer Date: 10/24/2010
Subscribed and sworn to before me this 24 day of February,
20 10.
Notary Public: Denise Corsair
Date Commission Expires: 8-15-12



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

Operator Name: American Warrior, Inc. Lease Name: V Strecker Well #: 2-6
 Sec. 06 Twp. 19 S. R. 21 East West County: Ness

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction, Compensated Neutron Density	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1416</td> <td>+772</td> </tr> <tr> <td>Heebner</td> <td>3650</td> <td>-1462</td> </tr> <tr> <td>Lansing</td> <td>3696</td> <td>-1508</td> </tr> <tr> <td>BKC</td> <td>4014</td> <td>-1826</td> </tr> <tr> <td>Ft. Scott</td> <td>4179</td> <td>-1991</td> </tr> <tr> <td>Cherokee</td> <td>4196</td> <td>-2008</td> </tr> <tr> <td>Mississippian</td> <td>4276</td> <td>-2088</td> </tr> </table>	Name	Top	Datum	Anhydrite	1416	+772	Heebner	3650	-1462	Lansing	3696	-1508	BKC	4014	-1826	Ft. Scott	4179	-1991	Cherokee	4196	-2008	Mississippian	4276	-2088
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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"	23	225	Common	160	2% gel & 3% cc

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input 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

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 06/13/2008			Producing Method: <input type="checkbox"/> Flowing <input 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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 32866

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

SERVICE POINT:
Ness City, Ks

DATE <u>10-6-08</u>	SEC. <u>6</u>	TWP. <u>19</u>	RANGE <u>21</u>	CALLED OUT <u>9:00 AM</u>	ON LOCATION <u>8:00 AM</u>	JOB START <u>11:30 AM</u>	JOB FINISH <u>12:00 PM</u>
LEASE <u>US+ecker</u>	WELL # <u>2-6</u>	LOCATION <u>Bazine, Ks. 1 S, 1 E</u>	COUNTY <u>Ness</u>	STATE <u>Ks</u>			
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>1 N, 1/2 W, 5/8</u>				

CONTRACTOR Petromark #1

TYPE OF JOB Rotary plug

HOLE SIZE 7 7/8" T.D. 4298'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH 1450'

TOOL _____ DEPTH _____

PRES. MAX 200 # MINIMUM ⊕

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT Freshwater + mud

OWNER American Warrior

CEMENT

AMOUNT ORDERED 200 SX 60/40 4% 1/4# Flt-seal

EQUIPMENT

PUMP TRUCK CEMENTER Rick H. / Kevin B.

447 HELPER Alvin B.

BULK TRUCK # 456-198 DRIVER Chris H. / Kevin W.

BULK TRUCK # _____ DRIVER _____

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

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REMARKS:

1450' - 50 SX

660' - 75 SX

240' - 40 SX

60' - 20 SX Cement die C.m.

Rathole - 15 SX

200 SX 60/40 4% Gel 1/4# Flt-seal

CHARGE TO: American Warrior

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 1450'

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD _____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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.

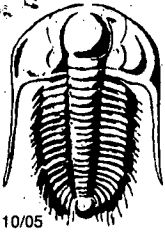
SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME X KENNETH B. ROACH

SIGNATURE X Kenneth B. Roach



TRILOBITE TESTING INC.

P.O. Box 362 • Hays, Kansas 67601

Test Ticket

Well Name & No. V. Strecker 2-6 Test No. 1 Date 10-5-08
 Company American Warrior Zone Tested Mississippian
 Address POB 399 Garden City, KS 67846-0399 Elevation 2188 KB 2183 GL
 Co. Rep / Geo. Scott Corsair Rig Petromark #1
 Location: Sec. 6 Twp. 19S Rge. 21W Co. Neos State KS
 Comment: _____ Release date / time: _____

Interval Tested 4284 - 4298 Initial Str Wt./Lbs. 57,000 Unseated Str Wt./Lbs. 59,000
 Anchor Length 14 Wt. Set Lbs. 27,000 Wt. Pulled Loose/Lbs. 80,000
 Top Packer Depth 4280 Tool Weight 2,500
 Bottom Packer Depth 4284 Hole Size 7 7/8" X Rubber Size 6 3/4" X
 Total Depth 4298 Wt. Pipe Run - Drill Collar Run 59
 Mud Wt. 9.2 LCM 0 Vis. 48.0 WL 11.2 Drill Pipe Size 4 1/2 Ft. Run 4229
 Blow Description IF: B.O.B. @ 32 min.

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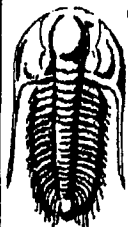
ISI: No return.
FF: B.O.B. @ 37 min.
FSI: No return.

Recovery - Total Feet 370 GIP 0 Ft. in DC 59 CONSERVATION DIVISION
 Rec. 55 Feet of OSWCM %gas _____ %oil 40 %water 60 %mud _____
 Rec. 300 Feet of MCM %gas _____ %oil 95 %water 5 %mud _____
 Rec. 15 Feet of M %gas _____ %oil _____ %water 100 %mud _____
 Rec. _____ Feet of _____ %gas _____ %oil _____ %water _____ %mud _____
 Rec. _____ Feet of _____ %gas _____ %oil _____ %water _____ %mud _____
 BHT 121 °F Gravity _____ °API D @ _____ °F Corrected Gravity _____ °API
 RW .416 @ 63 °F Chlorides 20,000 ppm Recovery 20,000 Chlorides 5,300 ppm System

(A) Initial Hydrostatic Mud	AK-1	Alpine	2130	PSI	Recorder No.	8017	Test Y	1,300"
(B) First Initial Flow Pressure			26	PSI	(depth)	4285	Jars X	2.50"
(C) First Final Flow Pressure			130	PSI	Recorder No.	8351	Safety Jt. X	75"
(D) Initial Shut-In Pressure			1,283	PSI	(depth)	4285	Circ Sub X	N/C
(E) Second Initial Flow Pressure			132	PSI	Recorder No.		Sampler	
(F) Second Final Flow Pressure			211	PSI	(depth)		Straddle	
(G) Final Shut-In Pressure			1,275	PSI	Initial Opening	45	Ext. Packer	
(Q) Final Hydrostatic Mud			2,057	PSI	Initial Shut-In	45	Shale Packer	
					Final Flow	45	Ruined Packer X	260"
					Final Shut-In	45	Mileage	70RT 105.00
					T-On Location	2:00 pm	Sub Total:	
					T-Started	2:34 pm	Std. By	
					T-Open	5:04 pm	Acc. Chg:	
					T-Pulled	8:12 pm	Other:	
					T-Out	10:42	Total:	

TRILOBITE TESTING INC. SHALL NOT BE LIABLE FOR DAMAGED OF ANY KIND OF THE PROPERTY OR PERSONNEL OF THE ONE FOR WHOM A TEST IS MADE, OR FOR ANY LOSS SUFFERED OR SUSTAINED, DIRECTLY OR INDIRECTLY, THROUGH THE USE OF ITS EQUIPMENT, OR ITS STATEMENTS OR OPINION CONCERNING THE RESULTS OF ANY TEST. TOOLS LOST OR DAMAGED IN THE HOLE SHALL BE PAID FOR AT COST BY THE PARTY FOR WHOM THE TEST IS MADE.

Approved By [Signature]
 Our Representative Chuck Smith



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

American Warrior Inc.
POB 399
Garden City, KS 67846-0399
ATTN: Scott Corsair

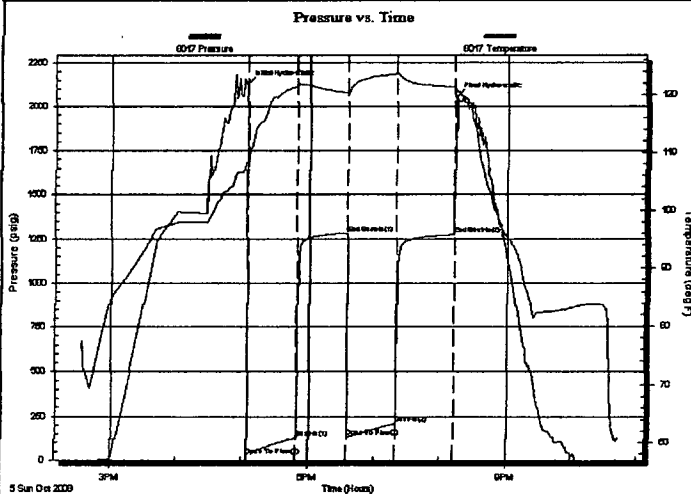
V. Strecker 2-6
S6-19s-21w Ness
Job Ticket: 32608 DST#: 1
Test Start: 2008.10.05 @ 14:33:30

GENERAL INFORMATION:

Formation: **Mississippian**
Deviated: **No Whipstock** ft (KB)
Test Type: **Conventional Bottom Hole**
Time Tool Opened: **17:04:00**
Tester: **Chuck Smith**
Time Test Ended: **22:42:15**
Unit No: **37**
Interval: **4284.00 ft (KB) To 4298.00 ft (KB) (TVD)**
Reference Elevations: **2188.00 ft (KB)**
Total Depth: **4298.00 ft (KB) (TVD)**
2183.00 ft (CF)
Hole Diameter: **7.88 inches** Hole Condition: **Good**
KB to GR/CF: **5.00 ft**

Serial #: 8017 **Inside**
Press@RunDepth: **211.09 psig @ 4285.00 ft (KB)** Capacity: **7000.00 psig**
Start Date: **2008.10.05** End Date: **2008.10.05** Last Calib.: **2008.10.05**
Start Time: **14:33:30** End Time: **22:42:15** Time On Btrr: **2008.10.05 @ 17:03:45**
Time Off Btrr: **2008.10.05 @ 20:13:15**

TEST COMMENT: IF: B.O.B. @ 32 min.
FS: No return.
FF: B.O.B. @ 37 min.
FS: No return.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2130.25	108.09	Initial Hydro-static
1	25.57	107.65	Open To Flow (1)
45	129.59	121.52	Shut-In(1)
91	1282.92	120.35	End Shut-In(1)
91	131.95	119.95	Open To Flow(2)
136	211.09	123.64	Shut-In(2)
189	1274.67	121.35	End Shut-In(2)
190	2057.16	120.61	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
15.00	M 100%M	0.07
300.00	MCW 5%M 95%W	3.81
55.00	OSWCM 40%W 60%M	0.77
0.00	0 GIP	0.00

Gas Rates

	Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)

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