

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

3/7/10

Operator: License # 4058
Name: American Warrior, Inc.
Address: P. O. Box 399
Garden City, KS 67846
Purchaser: N/A
Operator Contact Person: Joe Smith
Phone: (620) 275-2963
Contractor: Name: Discovery Drilling Co., Inc.
License: 31548
Wellsite Geologist: Jason Alm

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Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

1-31-08 2-5-08 3-1-08

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-23,406 - 00 - 00

County: Graham 70'S & 110'E of

C NE NE Sec. 11 Twp. 9S S. R. 21 East West

730 FNL feet from S / N (circle one) Line of Section

550 FEL feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Ficken Well #: 1-11

Field Name: Wildcat

Producing Formation: Arbuckle

Elevation: Ground: 2157' Kelly Bushing: 2165'

Total Depth: 3825' Plug Back Total Depth: 3799'

Amount of Surface Pipe Set and Cemented at 212 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1660 Feet

If Alternate II completion, cement circulated from 1660'

feet depth to Surface w/ 130 sx cmt.

Drilling Fluid Management Plan ATT TMS 6 18-09
(Data must be collected from the Reserve Pit)

Chloride content 10,000 ppm Fluid volume 240 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: [Signature]

Title: Compliance Coordinator Date: 3-6-08

Subscribed and sworn to before me this 6th day of March

20 08

Notary Public: [Signature]

Date Commission Expires: 09-12-09

ERICA KUHLMEIER
Notary Public - State of Kansas
My Appt. Expires 09-12-09

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
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Operator Name: American Warrior, Inc. Lease Name: Ficken Well #: 1-11
 Sec. 11 Twp. 9S S. R. 21 East West County: Graham 70'S & 110'E of

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:

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

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Top Anhydrite	1674	+492
Base Anhydrite	1714	+452
Topeka	3167	-1001
Heebner	3375	-1209
Toronto	3400	-1234
Lansing	3415	-1249
BKC	3634	-1468
Arbuckle	3750	-1584

CASING RECORD New 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	12-1/4"	8-5/8"	25#	212'	Common	150	3% cc 2% gel
Production Pipe	7-7/8"	5-1/2"	14#	3825'	EA/2	165	

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				

PERFORATION RECORD - Bridge Plugs Set/Type
 Specify Footage of Each Interval Perforated

Acid, Fracture, Shot, Cement Squeeze Record
 (Amount and Kind of Material Used)

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
4	3744' to 3747'		

TUBING RECORD

Size 2-3/8" Set At 3795'

Packer At

Liner Run Yes No

Date of First, Resumerd Production, SWD or Enhr.
SI

Producing Method Flowing Pumping Gas Lift 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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CHARGE TO:
AMERICAN WARRIOR LLC
 ADDRESS
 CITY, STATE, ZIP CODE

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TICKET
 No 13678

PAGE 1 OF 1

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 1-11	LEASE FICKEN	COUNTY/PARISH GRAHAM	STATE Ks	CITY KCC	DATE 2-27-08	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR EXPRESS WELL SERVICE	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE COMST PORT COLLAR	WELL PERMIT NO.	WELL LOCATION NW/PALCO, KS		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 110	40	ME			4.00	160.00
577		1			PUMP SERVICE	1	JOB			850.00	850.00
105		1			PORT COLLAR OPENING TOOL	1	JOB			400.00	400.00
330		1			SWIFT MULTI-DISSOLV STANDARD	130	SKS			15.00	1950.00
276		1			FLOCUE	50	lbs			1.25	62.50
290		1			D-ADR	2	gal			32.00	64.00
581		1			SERVICE CHARGE COMST	200	SKS			1.25	250.00
583		1			DRAYAGE	19970	lbs	399.4	M	1.00	399.40

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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X
 DATE SIGNED **2-27-08** TIME SIGNED **1000** A.M. P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					4135.90
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Graham TAX 5.55%	137.45
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	4273.35
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR **Wayne Wilson** APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 2-27-08 PAGE NO. 7

CUSTOMER AMERICAN WARRIOR WELL NO. 1-11 LEASE FICKEN JOB TYPE CEMENT PORT COLLAR TICKET NO. 13678

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0900							ON LOCATION
								2 3/8 x 5 1/2 PORT COLLAR 1660'
	1025				✓		1000	PSE TEST CASING - HELD
	1028	3	2	✓		300		OPEN PORT COLLAR - INJ RATE
	1030	4 1/4	72	✓		400		MAX CEMENT 130 SKS SMD 1/4" FLOCC P/SK
	1055	4	5 1/2	✓		500		DISPLACE CEMENT
	1105			✓		1000		CLOSE PORT COLLAR - PSE TEST - HELD
								CIRCULATE 15 SKS CEMENT TO PET
	1115	4	20	✓		500		RUN 4 JTS - CIRCULATE CLEAN
								WASH TRUCK
	1200							JOB COMPLETE
								THANK YOU WAKE, BRETT, ROB

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CHARGE TO: American Warrior, Inc.
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET No 13353

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1. SERVICE LOCATIONS <u>Hays, Ks.</u>	WELL/PROJECT NO. <u>1-11</u>	LEASE <u>Ficken</u>	COUNTY/PARISH <u>Graham</u>	STATE <u>Ks.</u>	CITY	DATE <u>2-5-08</u>	OWNER
2. <u>Ness City, Ks.</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>Discovery Dils. Co.</u>	RIG NAME/NO. <u>#1</u>	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>NW/Ficko, Ks.</u>	ORDER NO.	
3.	WELL TYPE <u>Dil</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Revent 5 1/2" Longstring</u>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE #106	75		mi		4.00	
578		1			Pump Charge - Longstring	1		ea	3825	1250.00	1250.00
221		1			Liquid KCL	2		gal		26.00	52.00
231		1			Mud Plug	500		gal		.75	375.00
290		1			D-Air	2		gal		32.00	64.00
402		1			Centralizers 5 1/2"	8		ea	5 1/2 in	100.00	800.00
403		1			Revent Basket 5 1/2"	1		ea	5 1/2 in	300.00	300.00
404		1			Part Collar 5 1/2"	1		ea	5 1/2 in	2300.00	2300.00
406		1			Latch down Plug & Ball 5 1/2"	1		ea	5 1/2 in	235.00	235.00
407		1			Insert Float Shoe w/Fillup 5 1/2"	1		ea	5 1/2 in	310.00	310.00
419		1			Rotating Head Rental	1		ea	5 1/2 in	250.00	250.00
		2			Continuation Page 2 of 2						34101.95

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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X [Signature]
 DATE SIGNED 2-5-08 TIME SIGNED _____ A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	9400.95
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR [Signature] APPROVAL _____

Thank You!

CUSTOMER American Energy, Inc WELL NO. 1741 LEASE Ficklen JOB TYPE Cement 5 1/2" Linestring TICKET NO. 13353

Table with columns: CHART NO., TIME, RATE (BPM), VOLUME (BBL/GAL), PUMPS, PRESSURE (PSI) TUBING, CASING, DESCRIPTION OF OPERATION AND MATERIALS. Includes handwritten entries for operations like 'Start 5 1/2" 14#/ft casing', 'Plug RH & MH', and 'Job complete'.

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THANKS Alan, Blaine & Jeff

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