

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING APPLICATION
Please TYPE Form and File ONE Copy

Form CP-1
March 2009
This Form must be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 4058
Name: American Warrior Inc.
Address 1: P.O. Box 399
Address 2: _____
City: Garden City State: Ks. Zip: 67846 + _____
Contact Person: Jody Smith
Phone: (620) 272-1023

API No. 15 - 175-21067-0001
If pre 1967, supply original completion date: _____
Spot Description: _____
C S/2 SE NW Sec. 19 Twp. 34 S. R. 31 East West
2,970 Feet from North / South Line of Section FE
3,300 Feet from East / West Line of Section FE
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Seward
Lease Name: Heyen Trust Well #: A-1

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: _____ Gas Storage Permit #: _____

Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: 85/8 Set at: 1417' Cemented with: 675sx Sacks
Production Casing Size: 51/2 Set at: 4689' Cemented with: 100 Sacks

List (ALL) Perforations and Bridge Plug Sets:

4542' to 4546'

Elevation: 2725' (G.L. / K.B.) T.D.: 6500' PBDT: 4606' Anhydrite Depth: NA
(Stone Corral Formation)

Condition of Well: Good Poor Junk in Hole Casing Leak at: _____
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

Per Kcc Instruction

Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes No

If ACO-1 not filed, explain why:

RECEIVED
KANSAS CORPORATION COMMISSION

JUN 02 2010

CONSERVATION DIVISION
WICHITA, KS

Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission

Company Representative authorized to supervise plugging operations: Jody Smith

Address: P.O. Box 399 City: Gardencity State: Ks. Zip: 67846 + _____

Phone: (620) 272-1023

Plugging Contractor License #: 31151 Name: Sargent and Horton Plugging Inc.

Address 1: Rt.1 Box 49 BA. Address 2: _____

City: Tyrone State: OK Zip: 73951 + 9731

Phone: (580) 854-6515

Proposed Date of Plugging (if known): NA

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 6/2/10 Authorized Operator / Agent: [Signature]
(Signature)



CORPORATION COMMISSION

Mark Parkinson, Governor Thomas E. Wright, Chairman, Joseph F. Harkins, Commissioner, Ward Loyd, Commissioner

NOTICE OF RECEIPT OF WELL PLUGGING APPLICATION (CP-1)

AMERICAN WARRIOR, INC.
PO BOX 399
GARDEN CITY, KS 67846

June 04, 2010

Re: HEYEN TRUST A #1
API 15-175-21067-00-01
19-34S-31W, 2970 FSL 3300 FEL
SEWARD COUNTY, KANSAS

Dear Operator:

This letter is to notify you that the Conservation Division has received your plugging proposal, form CP-1, for the above well and has reviewed the proposal for completeness. The central office will now forward your CP-1 to the district office listed below for review of the proposed plugging method. **Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113(b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit in accordance with K.A.R. 82-3-600.**

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well. This notice in no way constitutes authorization to plug the above well by persons not having legal rights of ownership or interest in the well.

This notice is void after December 1, 2010. The CP-1 filing does not bring the above well into compliance with K.A.R. 82-3-111 with regard to the Commission's temporary abandonment requirements.

Sincerely

Steve Bond
Production Department Supervisor

District: #1
210 E Frontview, Suite A
Dodge City, KS 67801
(620) 225-8888