

KCC OIL/GAS REGULATORY OFFICES

Date: 07/20/10

District: 1

Case #: _____

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 4058
 Op Name: American Warrior Inc.
 Address 1: PO Box 399
 Address 2:
 City: Garden City
 State: KS Zip Code: 67846 -0399
 Operator Phone #: (620) 275-2963

API Well Number: 15-165-21858-00-00
 Spot: SW SE SE NW Sec 31 Twp 21 S Rng 19 E / W
 2556 Feet from N / S Line of Section
 2050 Feet from E / W Line of Section
 GPS: Lat: _____ Long: _____ Date: _____
 Lease Name: Thompson Schadel Unit Well #: 1
 County: Rush

Reason for Investigation:

Company requested a witness to the alternate II cementing job

Problem:

Alternate II cementing requirements have not been met.

Persons Contacted:

Scott Corsair w/ American Warrior

Findings:

3:23 PM
 TD =4398'
 8 5/8" @ 222 w/ 160 sx
 5 1/2" @ 4397 w/ 175sx primary cement job.
 Located port collar at 1433'.
 Swift service pumped 100 sx of SMD cement circulating cement to surface up 8 5/8" X 5 1/2" annulus.
 Circulated 10 bbl cement to pit

Action/Recommendations:

Follow Up Required Yes No

Date: _____

Alternate II cementing requirements have been met.

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Verification Sources:

Photos Taken: 0

- RBDMS
- T-I Database
- Other: _____
- KGS
- District Files
- TA Program
- Courthouse

By: Richard M. Lacey
 Richard Lacey

Retain 1 Copy District Office
 Send 1 Copy to Conservation Division

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Form: _____

Date: 07/20/10

District: 1

License #: 4058

Op Name: 4058

Spot: SW SE SE NW Sec 31 Twp 21 S Rng 19 E W

County: Rush

Lease Name: Thompson Schadel Unit Well #: 1

I.D. Sign Yes No

Tank Battery Condition
Condition: Good Questionable Overflowing

Pits, Injection Site
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Oil Spill Evidence

Abandoned Well Potential Pollution Problem Yes No

Lease Cleanliness
 Very Good Satisfactory Poor Very Bad

Gas Venting Yes No

Pits
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Saltwater Pipelines
Leaks Visible: Y N Tested for Leaks: Y N

Flowing Holes

TA Wells

Monitoring Records

SWD/ER Injection Well Yes No Rush

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Gauge Connections Yes No

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

API Number	Footages	Spot Location	GPS	Well #	Well Status