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KEDNA-1 ORIG. PECID 8/09 + RET'D FOR CA-1.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CP-1 March 2010 This Form must be Typed Form must be Signed All blanks must be Filled

WELL PLUGGING APPLICATION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,

MUST be submitted with this form.

OPERATOR: License #: 4058	API No. 15 - 083-21, 654 -0000
Name: American Warrior, Inc	If pre 1967, supply original completion date:
Address 1: P O Box 399	Spot Description: SW-NE-NE-NE
Address 2:	<u>SW_NE_NE_NE_Sec. 32</u> Twp. <u>22</u> S. R. <u>24</u> ☐ East West
City: Garden City State: KS Zip: 67846 +	429 Feet from ✓ North / South Line of Section
Contact Person: Kevin Wiles, Sr	Feet from ✓ East / West Line of Section
Phone: (620) 275-2963	Footages Calculated from Nearest Outside Section Corner:
Friorie. (<u></u>) <u></u>	-
	Lease Name: Belote Well #: 1-32
	Lease Name. Vven #.
Check One: Oil Well Gas Well OG D&A Cathod	dic Water Supply Well Other:
SWD Permit #: ENHR Permit #:	Gas Storage Permit #.
Conductor Casing Size: Set at:	Cemented with: Sacks
Surface Casing Size: 8-5/8" Set at: 225'	Cemented with: 150 Sacks
Production Casing Size: Set at:	Cemented with: Sacks
List (ALL) Perforations and Bridge Plug Sets:	
Condition of Well: Good Poor Junk in Hole Casing Leak at: Proposed Method of Plugging (attach a separate page if additional space is needed): 50 sks @1750', 80 sks @250', 20 sks @60', 30 sks Rath Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes If ACO-1 not filed, explain why:	nole, 20 sks Mousehole RECEIVED
Plugging of this Well will be done in accordance with K.S.A. 55-101 et, seq. and the Ru	les and Regulations of the State Corporation Commission
Company Representative authorized to supervise plugging operations: Joe Smith Address: P O Box 399	Gardon City KS 67046
Address: 1 0 000 000 City:	Garden City State: KS Zip: 67846 +
Plugging Contractor License #: 5929	Duke Drilling Co
Address 1: 100 S Main St Addr	
, , ,	State: KS Zip: 67202 + 3737
Phone: (785_) 623-2920	State: 110 Zip: 07202 + 3737
Proposed Date of Plugging (if kn/ewn): 7/14/10	
PHA	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agen	t A
Date: 7/14/10 Authorized Operator / Agent: Linux	(Signature)
Mail to: KCC Conservation Division, 130 S. Mark	

Δ,...

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed:	(Cathodic Protection Borehole Intent)	ansfer) X CP-1 (Plugging Application)
OPERATOR: License #4058 Name: American Warrior, Inc	Well Location: SW_NE_NE_NE_Sec.32 Twp.	22 S. R. 24 ☐ East West
Address 1: P O Box 399	County: Hodgeman	
Address 2:	County: Hodgeman Lease Name: Belote	Well #:
City: Garden City State: KS Zip: 67846 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below: RECEIVED	
Contact Person: Kevin Wiles, Sr Phone: (620) 275-2963 Fax: (620) 275-5067		EIVED
Email Address: kwiles@pmtank.com	OCT 0.8 2010	
Surface Owner Information:	KCC V	VICHITA
Name: Lois F & Wesley I Belote Address 1: 1307 Pinion Rd	When filing a Form T-1 involving multip	le surface owners, attach an additional
Address 1: 1307 Pinion Rd	sheet listing all of the information to the left for each surface owner. Su owner information can be found in the records of the register of deeds for	
Address 2:	county, and in the real estate property t	
City: Derby State: KS Zip: 67057 +		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathethe KCC with a plat showing the predicted locations of lease roads, tare preliminary non-binding estimates. The locations may be entered a Select one of the following:	k batteries, pipelines, and electrical lines	s. The locations shown on the plat
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, and 3 my operator name.	located: 1) a copy of the Form C-1, For being filed is a Form C-1 or Form CB-1	m CB-1, Form T-1, or Form
I have not provided this information to the surface owner(s). It is KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling.	wner(s). To mitigate the additional cost	of the KCC performing this
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP	gfee with this form. If the fee is not rece -1 will be returned.	eived with this form, the KSONA-1
I hereby certify that the statements made herein are true and correct to		
Date: 7/14/10 Signature of Operator or Agent: 2	ritle: Ge	eologist

RECEIVED KANSAS CORPORATION COMMISSION

AUG 09 2010

OIL & GAS CONSERVATION DIVISION

KANSAS CORPORATION COMMISSION

Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed All blanks must be Filled

MEDISG. CP-1

CONSERVATION DIVISION WICHITA, KS

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License # 4058	Well Location:
Name: American Warrior, Inc	West Decidion. SW ME NE NE NE Sec.32 Twp. 22 S. R. 24 East West
Address 1: P O Box 399	County: Hodgeman
Address 2:	County: Hodgeman Lease Name: Belote Well #: 1-32
City: Garden City State: KS Zip: 67846 +	— If filing a Form T-1 for multiple wells on a lease, enter the legal description or
Contact Person: Kevin Wiles, Sr	the lease below:
Phone: (620) 275-2963 Fax: (620) 275-5067	_
Email Address: glinenberger@pmtank.com	_
Surface Owner Information:	
Name: Lois F & Wesley I Belote	_ When filing a Form T-1 involving multiple surface owners, attach an additional
Name: Lois F & Wesley I Belote Address 1: 1307 Pinion Rd	sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: Derby State: KS Zip: 67057 +	_
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease roads, to	ank batteries, pipelines, and electrical lines. The locations shown on the plat
the KCC with a plat showing the predicted locations of lease roads, the are preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, fax	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this x, and email address.
the KCC with a plat showing the predicted locations of lease roads, the are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface.	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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