

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM **WELL HISTORY - DESCRIPTION OF WELL & LEASE**

| OPERATOR: License # 4058 | | API No. 15 - 175-22, 187-0000 |
|---|---------------------------------------|--|
| Name:American Warrior, Inc | | Spot Description: NW-SE-SE |
| Address 1: P O Box 399 | | NW_SE_SW_SE_Sec. 34 Twp. 32 S. R. 31 East west |
| Address 2: | | 335 Feet from ✓ North / ☐ South Line of Section |
| City: Garden City State: KS | | 1,800 Feet from East / West Line of Section |
| Contact Person: Kevin Wiles, Sr | | Footages Calculated from Nearest Outside Section Corner: |
| Phone: (620) 275-2963 | | □ NE □ NW ☑ SE □ SW |
| • | | |
| CONTRACTOR: License # 5929 Name: Duke Drillling Co | | County: Seward Lease Name: Singley Well #: 11-34 |
| Wellsite Geologist: Roger L Fisher | | Field Name: Kismet |
| Purchaser: N/A Designate Type of Completion: | | Producing Formation: St Louis |
| CONFIDENCE | | |
| Designate Type of Completion: | | Elevation: Ground: 2768' Kelly Bushing: 2780' |
| ✓ New Well Re-Entry | Workover | Total Depth: 6125' Plug Back Total Depth: 6086' |
| □ Oil □ wsw □ s | wd slow | Amount of Surface Pipe Set and Cemented at: Feet |
| ☑ Gas ☐ D&A ☐ E | NHR SIGW | Multiple Stage Cementing Collar Used? |
| □ oc □ c | SSW Temp. Abd. | If yes, show depth set: 3182 Feet |
| CM (Coal Bed Methane) | | If Alternate II completion, cement circulated from: Surface |
| Cathodic Other (Core, Expl., e | etc.): | feet depth to: 3182' w/ 365 sx cmt. |
| If Workover/Re-entry: Old Well Info as foll | ows: | - OX ONL |
| Operator: | | Drilling Shuid Management Blan |
| Well Name: | | Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) |
| Original Comp. Date: Original Total Depth: | | Chloride content: 18,800 ppm Fluid volume: 115 bbls |
| ☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD | | |
| · 🗀 (| Conv. to GSW | Dewatering method used: EVAPORATION |
| Plug Back: | Plug Back Total Depth | Location of fluid disposal if hauled offsite: |
| Commingled Permit | t #: | Operator Name: |
| Dual Completion Permit | t #: | Lease Name: License #: |
| SWD Permit | t #: | |
| ENHR Permit | t #: | Quarter Sec TwpS. R East West |
| GSW Permit | t #: | County: Permit #: |
| 2/15/11 3/1/11 | 3/16/11 | |
| Spud Date or Date Reached TD Recompletion Date | Completion Date or Recompletion Date | |
| 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. | | |
| AFFID |)AVIT | KCC Office Use ONUTCENTED |
| I am the affiant and I hereby certify that all re | | requ- |
| lations promulgated to regulate the oil and | | |
| and the statements herein are complete ar | na correct to the best of my knowledg | Ge. Confidential Release Date: 3:31-11 |
| M. D. 11:11 | / | Wireline Log Received WCC. WICHITA |
| Signature: | | Geologist Report Received |
| Title: Geologist | Date: 3/28/11 | UIC Distribution |
| | | AIT II III Approved by: Date: |

ALT I II III Approved by:_

Date: