

KCC OIL/GAS REGULATORY OFFICES

Date: 03/15/11

District: 01

Case #: _____

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 4058
 Op Name: American Warrior
 Address 1: P.O. Box 399
 Address 2: P.O. Box 783188
 City: Garden City
 State: Kansas Zip Code: 67846 -0399
 Operator Phone #: (620) 587-3224

API Well Number: 15-135-25,213-00-00
 Spot: NW-SE-SW-SW Sec 35 Twp 20 S Rng 25 E / W
515 Feet from N / S Line of Section
961 Feet from E / W Line of Section
 GPS: Lat: _____ Long: _____ Date: _____
 Lease Name: McVicker A Well #: 1-35
 County: Ness

Reason for Investigation:

Alt.II was no witnessed called in to office by Jason with Swift Services.

Problem:

None, cement circulated to surface

Persons Contacted:

Findings:

8-5/8" @ 232W/150sxs cement
 TD @ 4550'
 5-1/2" @ 4546'W/125sxs cement
 Port Collar @ 1598' cemented with 125sxs-smd-1/4# flo seal-2%cc-15sxs went to pit

Action/Recommendations:

Follow Up Required Yes No

Date: _____

Alt.II requirements have been met

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MAR 18 2011
KCC WICHITA

Verification Sources

- RBDMS
- T-I Database
- Other: KCC DODGE CITY
- KGS District Files
- TA Program
- Courthouse

Photos Taken: _____

By: Michael Maier

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

Form: 02/22/2008

Date: 03/15/11

District: 01

License #: 4058

Op Name: 4058

Spot: NW-SE-SW-SW Sec 35 Twp 20 S Rng 25 E W

County: Ness

Lease Name: McVicker A Well #: 1-35

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 Ness

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 |
|---------------------|------------------|---------------|-----|--------|-----------------------------|
| 15-135-25,213-00-00 | 515FSL 961FWL | NW-SE-SW-SW | | 1-35 | New well, Alt. II completed |
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