

Notice: Fill out COMPLETELY
and return to Conservation Division at
the address below within
60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
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
Type of Well: (Check one) ☐ Oil Well ☐ Gas Well ☐ OG ☒ D&A ☐ Cathodic
☐ Water Supply Well ☐ Other: _____ ☐ SWD Permit #: _____
☐ ENHR Permit #: _____ ☐ Gas Storage Permit #: _____
Is ACO-1 filed? ☐ Yes ☒ No If not, is well log attached? ☒ Yes ☐ No
Producing Formation(s): List All (If needed attach another sheet)

Depth to Top: _____ Bottom: _____ T.D. _____
Depth to Top: _____ Bottom: _____ T.D. _____
Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 083-21668 00 00
Spot Description: _____
SE NE NW NW Sec. 36 Twp. 22 S. R. 23 ☐ East ☒ West
417 Feet from ☒ North / ☐ South Line of Section
1,087 Feet from ☐ East / ☒ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☒ NW ☐ SE ☐ SW
County: Hodgeman
Lease Name: Hodgeman O'Brate Well #: 1-36
Date Well Completed: Plugged
The plugging proposal was approved on: 1/14/11 (Date)
by: _____ (KCC District Agent's Name)
Plugging Commenced: 2/4/11
Plugging Completed: 2/4/11

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
		Surface	85/8	268'	0
		Production	51/2	4476'	2015'

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

CIBP@ 4400'w/2sx cement. Shot casing off at 2015', Pulled casing to 1440', Swift hooked up to casing, mixed and pumped 50sx 60/40 pos w/4% gel and 25 bbl water. Pulled casing to 660'. Swift hooked up to casing, Mixed and pumped 80sx 60/40 posw/4% gel and 3 bbl water. Pulled casing to 300'. Swift hooked up to casing, Mixed and pumped 50sx 60/40 posw/4% gel. Pulled casing to 40'. Swift hooked up to casing, Mixed and pumped 20sx 60/40 pos to top well off. Cut surface off and back filled.

Plugging Contractor License #: 32382 Name: Swift Services Inc.
Address 1: P.O. Box 466 Address 2: _____
City: Ness City State: Ks Zip: 67560 + 0446
Phone: (785) 798-2300
Name of Party Responsible for Plugging Fees: American Warrior Inc.
State of Kansas County: Finney ss. _____
Jody Smith (Print Name) ☒ Employee of Operator or ☐ Operator on above described well

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

Signature: _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED
FEB 08 2011

KCC WICHITA

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