

NAME CHANGE

correction #1

RECEIVED ORIGINAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

MAY 27 2011

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

KCC WICHITA

OPERATOR: License # 4058 Name: American Warrior INC Address 1: P.O.Box 399 Address 2: City: Garden City State: KS Zip: 67846 Contact Person: Kevin Wiles SR Phone: (620) 275-2963 EXT 306 CONTRACTOR: License # none Name: none Wellsite Geologist: none Purchaser: NCRA

Designate Type of Completion: [ ] New Well [ ] Re-Entry [ ] Workover [ ] Oil [ ] WSW [ ] SWD [ ] SIOW [ ] Gas [ ] D&A [ ] ENHR [ ] SIGW [ ] OG [ ] GSW [ ] Temp. Abd. [ ] CM (Coal Bed Methane) [ ] Cathodic [ ] Other (Core, Expl., etc.): Name Change

If Workover/Re-entry: Old Well Info as follows: Operator: American Warrior INC Well Name: Kate #3 INJ. Original Comp. Date: 4-9-1954 Original Total Depth: 3280 [ ] Deepening [ ] Re-perf. [ ] Conv. to ENHR [ ] Conv. to SWD [ ] Conv. to GSW [ ] Plug Back: Plug Back Total Depth [ ] Commingled Permit #: [ ] Dual Completion Permit #: [ ] SWD Permit #: [ ] ENHR Permit #: E-15609 [ ] GSW Permit #: NA 4-9-1954 5-26-11 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 159-02164-0001 Spot Description: NW. Sec. 18-19s-9w C NE SW NW Sec. 18 Twp. 19 S. R. 9 [ ] East [ ] West 3,644 Feet from [ ] North [ ] South Line of Section 4,161 Feet from [ ] East [ ] West Line of Section Footages Calculated from Nearest Outside Section Corner: [ ] NE [ ] NW [ ] SE [ ] SW County: Rice Lease Name: Buckley Well #: #3 INJ. Field Name: NA Producing Formation: Arb. Elevation: Ground: NA Kelly Bushing: 1747 Total Depth: 3280 Plug Back Total Depth: 3280 OH Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used? [ ] Yes [ ] No If yes, show depth set: Feet If Alternate II completion, cement circulated from: feet depth to: w/ sx cmt.

Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: NA ppm Fluid volume: NA bbls Dewatering method used: NA Location of fluid disposal if hauled offsite: Operator Name: Lease Name: License #: Quarter Sec. Twp. S. R. [ ] East [ ] West County: Permit #:

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.

AFFIDAVIT I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge. Signature: Title: Production Supt. Date: 5-26-11

KCC Office Use ONLY [ ] Letter of Confidentiality Received Date: [ ] Confidential Release Date: [ ] Wireline Log Received [ ] Geologist Report Received [ ] UIC Distribution ALT [ ] I [ ] II [ ] III Approved by: Date: 6/7/11

Operator Name: American Warrior INC Lease Name: Buckley Well #: #3 INJ.  
 Sec. 18 Twp. 19 S. R. 9  East  West County: Rice

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>2777</td> <td>-1030</td> </tr> <tr> <td>Lansing</td> <td>2927</td> <td>-1156</td> </tr> <tr> <td>Arbuckle</td> <td>3271</td> <td>-1524</td> </tr> </table>	Name	Top	Datum	Heebner	2777	-1030	Lansing	2927	-1156	Arbuckle	3271	-1524
Name	Top	Datum											
Heebner	2777	-1030											
Lansing	2927	-1156											
Arbuckle	3271	-1524											

CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	13-3/8"	10-3/4"	NA	165	NA	NA	NA
Production	9-7/8"	7"	NA	3271	NA	NA	NA

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
None	Open Hole 3271'-3280'	NA	

TUBING RECORD: Size: <u>2-7/8" duolined</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. NA		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <u>INJ. Well</u>	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3271-3280</u>
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