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

Form CP-4 March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

OPERATOR: License #:	4058		C.A.R. 62-0-11	' API No. 15 - <u>0</u>	83-21704	I-00-00		
Name: American Warrior, Inc.				Spot Description:				
Address 1: 3118 Cummings Road				SW NW NE NE Sec. 25 Twp. 22 S. R. 22 East West				
Address 2: P.O. Box 399				520 Feet from Morth / South Line of Section				
city: Garden City State: KS Zip: 67846 + 0399				1,010 Feet from Faction Footages Calculated from Nearest Outside Section Corner:				
Contact Person: _Cecil_O'Brate								
Phone: (620_) _275-2963				NE NW SE SW County: Hodgeman County, Kansas				
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic								
		SWD_Permit #:						
ENHR Permit #: Gas Storage Permit #: Is ACO-1 filed? Yes No If not, is well log attached? Yes				Pote Wall Completed				
								Producing Formation(s): L
		Bottom: T.D.				(KCC District Agent's Name)		
Dep	Depth to Top: Bottom: T.D				Plugging Commenced: 05-22-11 Plugging Completed: 05-22-11			
		Bottom:T.D.		Plugging Comple	ted: U3-2	22-11		
	·	··						
Show depth and thickness	of all water, oil and gas	formations.						
Oil, Gas or Water Records Casi				g Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size	Setti	Setting Depth	Pulled Out		
				 -				
Describe in detail the man	ener in which the well is	plugged, indicating where t ter of same depth placed fro	the mud fluid wa	as placed and the me	ethod or meth	ods used in introducing it into the hole. If		
				(top) for each plug s	ei,			
		ent through drillp	oipe					
2nd Plug: 530' w								
3rd Plug: 290' w								
Top Plug: 60' w/.	20 Rathole w/3	0 Mousehole w/2	:0					
Plugging Contractor License #: 5929				lame: Duke Drilling Co., Inc.				
Address 1: P.O. Box	823		Address	s 2·				
City: _Great.Bend						·		
				_ State: _VGI1292	·	Zip: <u>0/330</u> +		
Phone: (620_)793	-8366			_				
Name of Party Responsible	e for Plugging Fees: _A	merican Warrior, Ir	nc.					
State of Kansas	Cou	nty. Finney		, SS.				
Gil Linenberger (Print Name)				Employee of Operator or Operator on above-described well,				
						·		
the same are true and corr		owledge of the facts statem	елts, and matte	rs herein contained,	and the log of	f the above-described well is as filed, and		
U.	Pi Ville God.					BEATT:		
Signature:						<u>REC</u> EIVED		