

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2075
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-62-3-117

API NUMBER 15-109-20,255 -00-00

LEASE NAME McDaniel "B"

AUG 19 2003

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

WELL NUMBER 1

2310 Ft. from (S) Section Line

2310 Ft. from (W) Section Line

CONSERVATION DIVISION
WICHITA, KS

SEC. 28 TWP. 15 RGE. 34 (E) or (W)

COUNTY Logan

Date Well Completed 10-14-82

Plugging Commenced 7-31-03

Plugging Completed 7-31-03

LEASE OPERATOR American Warrior, Inc.

ADDRESS P. O. Box 399, Garden City, KS 67846

PHONE# (620) 275-2963 OPERATORS LICENSE NO. 4058

Character of Well Oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 7-28-03 (date)

by Steve Middleton (KCC District Agent's Name).

Is ACO-1 filed? YES If not, is well log attached? KCC has logs

Producing Formation Cherokee Depth to Top 4461' Bottom 4480' T.O. 5259'

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

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
	SURFACE	357'	0	8-5/8"	357'	NONE
	PRODUCTION	4500'	0	5-1/2"	4500'	NONE

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

Pump down 5-1/2" csg. 42 SKS Com. w/600#s Hulls 20 SKS gel.
And 72 SKS Cem. Press to 350#s Hook up to Braden Head. Pump 5 SKS
Com. Press to 300#s St. Top off 5-1/2" w/ 20 SKS Cem.

Name of Plugging Contractor Swift Services, XXX, Inc. License No. 32382

Address P. O. Box 466, Ness City, Kansas 67560

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Warrior, Inc.

STATE OF Kansas COUNTY OF Finney, SS.

Nancy E. Davis, Compliance Coordinator (Employee of Operator) or (Operator) o
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 as filed the
the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 399 Garden City, KS 67846

SUBSCRIBED AND SWORN TO before me this 18th day of July, 2003
DEBRA J. PURCELL
Notary Public, State of Kansas
My Appt. Expires 11/4/03
My Commission Expires: 11/4/03

Notary Public