

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

7/16/11
AMENDED

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

CONTRACTOR: License # 5929

Name: Duke Drilling Co, Inc

Wellsite Geologist: Marc Downing

Purchaser: _____

Designate Type of Completion:

____ New Well ____ Re-Entry ____ Workover

____ Oil ____ SWD ____ SLOW

Gas ____ ENHR ____ SIGW

____ CM (Coal Bed Methane) ____ Temp. Abd.

____ Dry ____ Other _____

(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

____ Deepening ____ Re-perf. ____ Conv. to Enhr. ____ Conv. to SWD

____ Plug Back: _____ Plug Back Total Depth _____

____ Commingled Docket No.: _____

____ Dual Completion Docket No.: _____

____ Other (SWD or Enhr.?) Docket No.: _____

5/08/09 5/16/09 3/02/10

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 047-21, 585-0000

Spot Description: C-NW-SE-NE

S2 NE SE SE Sec. 17 Twp. 25 S. R. 17 East West

858 Feet from North / South Line of Section

353 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Edwards

Lease Name: Nelson Well #: 1-17

Field Name: McCarty NE

Producing Formation: Cherokee Sand

Elevation: Ground: 2131' Kelly Bushing: 2143'

Total Depth: 4591' Plug Back Total Depth: 4540'

Amount of Surface Pipe Set and Cemented at: 538 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 cmrt.

Drilling Fluid Management Plan AKINS 3-11-10
(Data must be collected from the Reserve Pit)

Chloride content: 11,000 ppm Fluid volume: 320 bbls

Dewatering method used: EVAPORATION

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

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.

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: Teaira Turner

Title: Geologist Date: 3/03/10

Subscribed and sworn to before me this 3rd day of March

20 10

Notary Public: Teaira Turner

Date Commission Expires: 10/15/2013

Teaira Turner
Notary Public - State of Kansas
My Appt. Expires 10/15/2013

KCC Office Use ONLY

N Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

____ UIC Distribution

RECEIVED

KANSAS CORPORATION COMMISSION

MAR 08 2010

CONSERVATION DIVISION
WICHITA, KS

Operator Name: American Warrior, Inc Lease Name: Nelson Well #: 1-17
 Sec. 17 Twp. 25 S. R. 17 East West County: Edwards

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Borehole Compensated Sonic/Dual Compensated Porosity/Microresistivity/Dual Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Name</td> <td style="width: 15%;">Top</td> <td style="width: 15%;">Datum</td> </tr> <tr> <td>Stone Corral</td> <td>1173'</td> <td>+970</td> </tr> <tr> <td>Heebner</td> <td>3816'</td> <td>-1673</td> </tr> <tr> <td>Lansing</td> <td>3955'</td> <td>-1812</td> </tr> <tr> <td>BKC</td> <td>4255'</td> <td>-2112</td> </tr> <tr> <td>Pawnee</td> <td>4385'</td> <td>-2242</td> </tr> <tr> <td>Cherokee</td> <td>4421'</td> <td>-2278</td> </tr> <tr> <td>Mississippi</td> <td>4505'</td> <td>-2362</td> </tr> </table>	Name	Top	Datum	Stone Corral	1173'	+970	Heebner	3816'	-1673	Lansing	3955'	-1812	BKC	4255'	-2112	Pawnee	4385'	-2242	Cherokee	4421'	-2278	Mississippi	4505'	-2362
Name	Top	Datum																							
Stone Corral	1173'	+970																							
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BKC	4255'	-2112																							
Pawnee	4385'	-2242																							
Cherokee	4421'	-2278																							
Mississippi	4505'	-2362																							

CASING RECORD <input checked="" type="checkbox"/> New <input 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	12-1/4"	8-5/8"	23	538'	Standard	300	2%Gel 3%CC
Production	7-7/8"	5-1/2"	17.0	4588'	Standard EA/2	175	1/4#Flocele

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" 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 (Amount and Kind of Material Used)	Depth
4	4460'-4468'	2500 Gal 15% NE-FE	Same

TUBING RECORD: Size: <u>2-3/8"</u> Set At: <u>4588'</u> Packer At: <u>4432'</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. Shut In	Producing Method: <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. <u>N/A</u>	Gas Mcf _____ Water Bbls. _____ Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <div style="text-align: center;"> RECEIVED KANSAS CORPORATION COMMISSION </div>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

MAR 08 2010

CONSERVATION DIVISION
WICHITA, KS



CHARGE TO: AMERICAN WARRIOR Inc
 ADDRESS:
 CITY, STATE, ZIP CODE:

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAR 08 2010
 CONSERVATION DIVISION
 WICHITA, KS

TICKET
 No 16424

PAGE 1 OF 2

SERVICE LOCATIONS 1. <u>HWS</u>	WELL/PROJECT NO. <u>1-17</u>	LEASE <u>NELSON</u>	COUNTY/PARISH <u>EDWARDS</u>	STATE <u>KS</u>	CITY	DATE <u>05-17-09</u>	OWNER
2. <u>NESS</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <u>DUNE DRUG RIG 1</u>	SHIPPED VIA <u>GT</u>	DELIVERED TO <u>28.4 1/2, LOUIS</u>	ORDER NO.	
3.	WELL TYPE <u>GAS</u>	WELL CATEGORY <u>Develop</u>	JOB PURPOSE <u>LONGSTRING</u>	WELL PERMIT NO. <u>15-DY-21525</u>	WELL LOCATION <u>T17, 25-R17</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
575		1			MILEAGE #112	60		mi		5.00	300	00
578		1			Pump SERVICE	1		EA		1400.00	1400	00
221		1			LIQUID WCL	2		Gal		25.00	50	00
281		1			MUD FLUSH	500		Gal		1.00	500	00
290		1			D-AIR	2		Gal		35.00	70	00
402		1			CONTRACTOR	7		EA	5 1/2 in	55.00	385	00
403		1			CMT BRIDGT	1		EA	5 1/2 in	180.00	180	00
406		1			LATCH DOWN PLUG Baffle	1		EA	5 1/2 in	225.00	225	00
407		1			INSUL FIBERGLASS 1/2 IN DIA	1		EA	5 1/2 in	275.00	275	00
419		1			ROTATING HEAD RENTAL	1		EA	5 1/2 in	150.00	150	00

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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X Kevin Wices by Date

DATE SIGNED 05-17-09 TIME SIGNED 0330 A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE		
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				Pg-1 PAGE TOTAL	3535 00
WE UNDERSTOOD AND MET YOUR NEEDS?				Pg-2	3973 01
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				sub TOTAL	7508 01
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Edwards TAX 6.3%	314 80
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	7822 81
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

BL LOG

SWIFT Services, Inc. **CONFIDENTIAL**

DATE 05-17-09 PAGE NO. 7

FORMER AWI WELL NO. 117 LEASE NELSON JOB TYPE LONGSTRUNG TICKET NO. 16424

WELL NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0330							ONLOCATION, L.M. INC. DOWN CONSERVATION DIVISION MACHITA, KS MAR 0 8 2010 KANSAS CORPORATION COMMISSION RECEIVED
	0700							START ON LAFWATEREQV
	0910							TAC BITUM, DRIP BAL
	0915							BREAD CIRC
	0945		7.5					PLUS RH, MH 45 SYSTEM 30, 15
	0950	5.0	0				200	START MUDFLOW
			12					" WCL "
			33					END
			0					START CNT
			31.5					END
								DROP LD, PLUS, WASHA
	1005	7.0	0				200	START DISP
			75				200	CNT ON BOTTOM
			80.0				400	
			85.0				450	
			90.0				500	
			95.0				600	
			100.0				700	
	1020	45	105.5				1400	LAND PLUG
	1025							RELEASE - DRY
	1100							JOB COMPLETE THANK YOU! DAVE JOHNS, DAVEY



Box 400
Ness City, KS 67560
Off: 785-798-2300

CUSTOMER *American Warrior* WELL *1-17, NELSON* DATE *05-17-09* PAGE *2* OF *2*

PRICE REFERENCE	SECONDARY/REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		UNIT PRICE		AMOUNT	
		PO	AC	DP				UM				
325						<i>STD EA.2</i>	<i>175</i>	<i>SK</i>	<i>11</i>	<i>00</i>	<i>1925</i>	<i>00</i>
276						<i>FLOCEL</i>	<i>44</i>	<i>LB</i>	<i>1</i>	<i>50</i>	<i>66</i>	<i>00</i>
283						<i>SALT</i>	<i>875</i>	<i>LB</i>	<i>15</i>		<i>131</i>	<i>25</i>
284						<i>CALSAL</i>	<i>8</i>	<i>SK</i>	<i>30</i>	<i>00</i>	<i>240</i>	<i>00</i>
292						<i>HALAM 322</i>	<i>123</i>	<i>LB</i>	<i>6</i>	<i>50</i>	<i>799</i>	<i>50</i>
581						<i>SERVICE CHG CONT</i>	<i>175</i>	<i>SK</i>	<i>1</i>	<i>50</i>	<i>262</i>	<i>50</i>
583						<i>DUTYMR</i>	<i>548.76</i>	<i>TM</i>	<i>1</i>	<i>00</i>	<i>548</i>	<i>76</i>

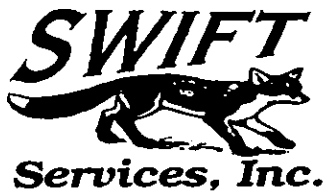
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RECEIVED
 KAISAS CORPORATION
 CONSERVATION DIVISION
 MAR 08 2010
 NESS CITY, KS

SERVICE CHARGE CUBIC FEET

TOTAL WEIGHT LOADED MILES TON MILES

CONTINUED TOTAL **3923.01**



CHARGE TO: *American Wildlife Inc*
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET No 15940

CONFIDENTIAL

PAGE 1 OF 1

SERVICE LOCATIONS
 1. *Way Ks* WELL/PROJECT NO. *51-17* LEASE *Medusa* COUNTY/PARISH *1 Point* STATE *Ks* CITY *Way* DATE *3/7/11* OWNER *...*
 2. *...* TICKET TYPE SERVICE SALES CONTRACTOR *D. ...* RIG NAME/NO. SHIPPED VIA *Tr* DELIVERED TO *...* ORDER NO.
 3. WELL TYPE *...* WELL CATEGORY *Development* JOB PURPOSE *Cont Surface Pipe* WELL PERMIT NO. WELL LOCATION
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
57		1			MILEAGE <i>2111</i>	50	mi			5	2500
576D		1			<i>Surface Pipe (D. ...)</i>	1				1100	1100
529	CONSERVATION DIVISION WICHITA, KS RECEIVED MAR 9 8 2011 KANSAS CORP. & COMMISSION	2			<i>Stemmed Cont. ...</i>	300	h			11	3300
27		2			<i>Collection Chloride</i>	8	kg			35	280
271		2			<i>Port water Cont</i>	6	skt			20	120
51		2			<i>Cont Service Charge</i>	700	ph			1	470
52		2			<i>Diaryge</i>	736	TAM			1	736

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED *3/7/11* TIME SIGNED *...* A.M. P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				6236
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				TAX
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR *...* APPROVAL *...*

Thank You!

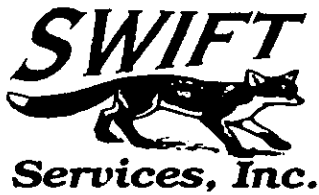
JOB LOG

SWIFT Services, Inc.

DATE 5-11-11 PAGE NO. 1

CUSTOMER Algonquin Western, Inc WELL NO. #117 LEASE N. 13.3 JOB TYPE Conduct Surface Pipe TICKET NO. 1111

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	6:00							Start
								CONSERVATION DIVISION WICHITA, KS
								8 1/2" x 2 1/2" x CONFIDENTIAL
								Start Cas in the line.
								RECEIVED KANSAS CORPORATION MAR 08 2010
	6:15	4	0					Start Connect
	6:30	4	73/0					End Connect / at 1 Dis 1 report
	6:45		33					Connect Displayed
								300 Start 7
								300, to Start 28, 13800
								Case 70, to 7, 11
								Thank you
								Nick, Surf P. + S/In.



CHARGE TO:
 ADDRESS:
 CITY, STATE, ZIP CODE:

CONFIDENTIAL

TICKET
 17362

PAGE 1 OF 1

SERVICE LOCATIONS: 1. NESS CITY, KS.

WELL/PROJECT NO.: 1-17 LEASE: NELSON COUNTY/PARISH: EDWARDS CO STATE: KS CITY: NESS CITY, KS DATE: 12/11/09 OWNER:

TICKET TYPE: SERVICE SALES CONTRACTOR: FORTIN'S LLC RIG NAME/NO.: #10 SHIPPED VIA: DELIVERED TO: 2 1/2 E 110210, S. 4 3/4 ORDER NO.: 17362

WELL TYPE: (ITL WELL) WELL CATEGORY: ~~DRILLING~~ ACTING TRUST SAND JOB PURPOSE: WELL PERMIT NO.: WELL LOCATION: 500-17-255-17L

REFERRAL LOCATION: INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
510		1			MILEAGE 107	1	@	85	mi	5.00	425.00
511		1			Acid Pump Chemicals	1	@			600.00	600.00
300		1			Remaining Acid w/ 1500 lbs	500	gal	1.40		1.40	700.00
230		1			Surf-3	2	gal			25.00	50.00
235		1			INH3B-1	1	gal			35.00	35.00
237		1			Clay Slay-1	1	gal			30.00	30.00
254		1			ITL CELL-1	1	gal			35.00	35.00

RECEIVED
 KANSAS CORPORATE DIVISION
 MAR 08 2010
 COOPERATION DIVISION
 WICHITA, KS

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

NEV Kevin
 X DATE SIGNED: 12/11/09 TIME SIGNED: 11:00 A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				1875.00
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Edwards TAX 6,370
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL 1875.00

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: DUSTY D. TALK APPROVAL:

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 121109 PAGE NO. 1

CUSTOMER AMERICAN L. P. RUIA WELL NO. 1-17 LEASE NELSON JOB TYPE ACIDIZE TREAT TICKET NO. 17362

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1907							(2) LOCATION AREAS SURFING.
								THE SURFACE PERFS 4460'-68'
								FRONT 195' SPOT NONE
								2 3/4" x 1/2" TREAT 4435'
								17# CS. 25' .58 161
								Tb. 17.16345 261
								TORN 17.74345 161
	1944	4	.1	✓				START PUMPING FILL UP WELL
	1950	.14	18.50	✓		300		LOADED STAGING
	1955	.14	18.50	✓		400		STAGING NO DRIF
	1010	.14	18.75	✓		500		STAGING 200# DRIF (A. 5MEN 1561 Cur
	1020	.14	18.9	✓		750		" " " "
	1027	.14	19	✓		750		" " " " 1 1/4 161 Cur
	1045	.14	19.50	✓		700		FEEDING TREAT
	1054	.14	21	✓		500		"
	1057	.14	21.50	✓		475		"
	1101	.23	22.50	✓		500		"
	1112	.25	25	✓		400		"
	1131	.10	30	✓		475		ISIP
						225		5MEN
						100		10MEN
						50		11MEN
						0		18MEN
								REG DOWN
								TREAT
	1210							JOB COMPLETED
								THANK YOU JUSTIN! JEFF

CONFIDENTIAL



CHARGE TO: **AMERICAN WARRIOR**
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET
18259

PAGE 1 OF 1

SERVICE LOCATIONS 1. NESS CITY	WELL/PROJECT NO. NEILSON 1-7	LEASE EDWARDS	COUNTY/PARISH KS.	CITY LEWIS, KS.	DATE 22 DEC 09	OWNER
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR PLAINS	RIG NAME/NO.	SHIPPED VIA LOCATION	ORDER NO.	
3.	WELL TYPE GAS/OIL	WELL CATEGORY WORKOVER	JOB PURPOSE ACIDIZE FORMATION	WELL PERMIT NO.	WELL LOCATION 3E, 5S, WINTO	
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS					

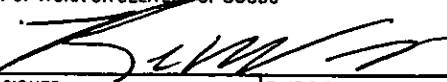
PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
500		1			MILEAGE #110	90	MIL			5.00	450.00
501		1			PUMP CHARGE	1	SB			600.00	600.00
301		1			FE ACID	2000	gal	15%		1.75	3500.00
230		1			SURF-3	4	gal			25.00	100.00
235		1			INWIB-1	3	gal			35.00	105.00
254		1			MICELL-1	4	gal			35.00	140.00
232		1			MUSDL	40	gal			15.00	600.00
237		1			CLA-STA-1	2	gal			30.00	60.00

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 MAR 08 2010
 WICHITA, KS

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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X 
 DATE SIGNED **22 Dec 09** TIME SIGNED **1005** A.M. P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	5555.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Edwards TAX 6.3%	66.15
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	5621.15
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR 

APPROVAL _____ Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 22 Dec 09 PAGE NO. 7

CUSTOMER AMERICAN WARRIOR

WELL NO.

LEASE NELSON 1-7

JOB TYPE ACIDIZE FORMATION

TICKET NO. 18259

CHART NO.	TIME	RATE (BPM)	VOLUME (BBU/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0830							ON LOCATION SET TRUCK UP
	0844	3		✓		Ø		START ACID DOWNWELL
	0851	2	17.5	✓		700		TUBING LOADED TREATING
		2	48	✓		900		PRESSURE INCREASE START FLUSH
		2	65.5	✓		900		START OVERFLUSH
	0930	Ø	81	✓		800		ISIP
						400		5 min SHUT IN
						300		10 min SHUT IN
						200		15 min SHUT IN
	0947							SHUT WELL IN
								KNOCK LOOSE RACK TRUCK UP
								TREAT WITH 2000 gal 15% FE.
								PERES @ 4460-68
								PACKER @ 4433
	1015							JOB COMPLETE
								THANKS #110
								JASON F ROGER

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KANSAS CORPORATION COMMISSION

MAR 08 2010

CONSERVATION DIVISION
WICHITA, KS