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

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

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #: 4058				API No. 15 - 009-25567-00-00		
Name:American_Warrior, Inc				Spot Description:		
Address 1: 3118 Cummings Road				SW_NE_NE_SE_Sec. 23 Twp. 17 S. R. 14 East		
Address 2: PO Box 399						
City: Garden City State: KS Zip: 67846 + 0399 -						
Contact Person: _Cecil O'Brate						
Phone: (620_) 275-2963						
Type of Well: (Check one) Oil Well Gas Well OG V 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						
					(KCC District Agent's Name)	
Producing Formation(s): List All (If needed attach another sheet) Depth to Top: Bottom: T.D				Plugging Commenced: 06-15-11		
	ttom: T.D					
Depth	to Top: Bot	ttom:T.D	Fidggiii	g Completed		
Show depth and thickness o	f all water, oil and gas for	mations.		· · · · · · · · · · · · · · · · · · ·		
Oli, Gas or Water Records Cas				sing Record (Surface, Conductor & Production)		
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
	SURFACE		8-5/8"	983'	NONE	
				<u> </u>		
Describe in detail the manner in which the well is plugged, indicating where the mud fluid w cement or other plugs were used, state the character of same depth placed from (bottom), to 1st Plug: 3367' w/25 sacks cement through drillpipe 2nd Plug: 1033' w/80 3rd Plug: 350' w/25				RECEIVED		
Top Plug: 40' w/1	Mousehole w/20	JUL 2 6 2011				
				K	CC WICHITA	
Physica Contractor License # 5929			Name: Duke Drilling Co., Inc.			
city: _Great_Bend			State:_	KS	zip: <u>67530</u> +	
Phone: (620) 793-						
Name of Party Responsible	for Plugging Fees: _ALI	nencan vvanor, mc.				
State of Kansas County, Finney Gil Linenberger (Print Name)						
Gil Linen b	Claer Driet Nome		☑	Employee of Operator of	or Operator on above-described well,	
	ith, says: That I have know	•		contained, and the log	of the above-described well is as filed, and	
Signature:	h. K					