

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

7/21/13
Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4058
Name: American Warrior Inc.
Address 1: P.O. Box 399
Address 2: _____
City: Garden City State: Ks. Zip: 67846 + _____
Contact Person: Jody Smith
Phone: (620) 275-2963
CONTRACTOR: License # 5822
Name: Val Energy Inc.
Wellsite Geologist: Harley Sayles
Purchaser: NA

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil W&W SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., 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
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

6/17/11	6/28/11	6/28/11
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 069-20346-0000

Spot Description: _____
SE SE NW SW Sec. 17 Twp. 28 S. R. 30 East West
1,349 Feet from North / South Line of Section
1,208 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Gray

Lease Name: Shadow Well #: 1-17

Field Name: _____

Producing Formation: _____

Elevation: Ground: 2794' Kelly Bushing: 2804'

Total Depth: 5174' Plug Back Total Depth: surface

Amount of Surface Pipe Set and Cemented at: 1620' 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: 15,000 ppm Fluid volume: 80 bbls

Dewatering method used: Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

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

County: _____ Permit #: _____

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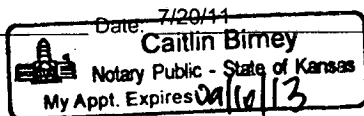
JUL 17 2013

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: [Signature]
Title: Foreman

Date: 7/20/11

 Caitlin Birney
 Notary Public - State of Kansas
 My Appt. Expires 01/16/13

RECEIVED
KCC Office Use ONLY
 Letter of Confidentiality Received
 Date: 7/21/11 - 7/21/13
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 C Distribution
 ALT I II III Approved by: MS Date: 8/16/11