

KCC OIL/GAS REGULATORY OFFICES

Date: 9-1-2011

District: _____

Case #: _____

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 4058
 Op Name: American Warrior
 Address 1: P.O Box 399
 Address 2: _____
 City: Garden City
 State: KS. Zip Code: 67801
 Operator Phone #: 620-275-2963

API Well Number: 15-083-21, 723-0000
 Spot: NWSENE Sec 31 Twp 21 S Rng 24 E/W
 950 Feet from N/S Line of Section
 597 Feet from E/W Line of Section
 GPS: Lat: _____ Long: _____ Date: _____
 Lease Name: La Force Well #: 1-31
 County: Hodgeman

Reason for Investigation:

ACT. II completion.

Problem:

None

Persons Contacted:

Swift Cement.

Findings:

8 5/8 @ 224' w/150x
 5 1/2" e 4600' w/125 x
 PC @ 1583' cemented w/130 SMO & #1 R/W Seal.
 Circulated 20 xxs. to pit.
 Witness only cement in reserve pit, was 30' code to job.

Action/Recommendations:

Follow Up Required Yes No

Date: _____

Verification Sources:

- RBDMS
- T-I Database
- Other: _____
- KGS
- District Files
- TA Program
- Courthouse

Photos Taken: _____

By: Steve Burnett

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

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KCC DODGE CITY

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SEP 07 2011

KCC WICHITA

Date: _____

District: _____

License #: _____

Op Name: _____

Spot: _____ Sec _____ Twp _____ S Rng _____ E W

County: _____

Lease Name: _____ Well #: _____

I.D. Sign Yes No

Tank Battery Condition
Condition: Good Questionable Overflowing

Pits, Injection Site
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Oil Spill Evidence

Abandoned Well Potential Pollution Problem Yes No

Lease Cleanliness
 Very Good Satisfactory Poor Very Bad

Gas Venting Yes No

Pits
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Saltwater Pipelines
Leaks Visible: Y N Tested for Leaks: Y N

Flowing Holes

TA Wells

Monitoring Records

SWD/ER Injection Well Yes No

Gauge Connections Yes No

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

API Number	Footages	Spot Location	GPS	Well #	Well Status

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Form: _____