

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

10/28/11

OPERATOR: License # 4058
 Name: American Warrior, Inc.
 Address 1: P. O. Box 399
 Address 2: _____
 City: Garden City State: KS Zip: 67846 + _____
 Contact Person: Joe Smith
 Phone: (620) 275-2963
 CONTRACTOR: License # 5929 **CONFIDENTIAL**
 Name: Duke Drilling Co., Inc. DET 8-2009
 Wellsite Geologist: Jason Alm
 Purchaser: N/A **KCC**
 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.: _____
7-28-09 8-7-09 10-6-09
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 083-21,603-00-00
 Spot Description: _____
NE NW SW NE Sec. 26 Twp. 21 S. R. 25 East West
1420 Feet from North / South Line of Section
2295 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: HODGEMAN
 Lease Name: WRIGHT J Well #: 5-26
 Field Name: WILDCAT
 Producing Formation: ARBUCKLE
 Elevation: Ground: 2422' Kelly Bushing: 2433'
 Total Depth: 5400' Plug Back Total Depth: 5400'
 Amount of Surface Pipe Set and Cemented at: 222 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: 1646 Feet
 If Alternate II completion, cement circulated from: 1646'
 feet depth to: SURFACE w/ 140 sx cmt.

Drilling Fluid Management Plan SWDUST 11-1209
 (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: [Signature]
 Title: COMPLIANCE COORDINATOR Date: 10-28-09
 Subscribed and sworn to before me this 28th day of October
 20 09
 Notary Public: Caitlin Birney
 Date Commission Expires: 9/10/2013

(Per. assigned to PK)
 KCC Office Use ONLY 10/29/09

Letter of Confidentiality Received
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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 OCT 29 2009

Caitlin Birney
 Notary Public - State of Kansas
 My Appt. Expires 09/10/2013

KCC WICHITA

Operator Name: American Warrior, Inc. Lease Name: WRIGHT J Well #: 5-26
 Sec. 26 Twp. 21 S. R. 25 East West County: HODGEMAN

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 LOG; DUAL INDUCTION LOG; DUAL COMPENSATED POROSITY LOG; MICRORESISTIVITY LOG; SECTOR BOND/GAMMA RAY CCL LOG	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>ANHYDRITE</td> <td>1642</td> <td>+791</td> </tr> <tr> <td>HEEBNER</td> <td>3842</td> <td>-1409</td> </tr> <tr> <td>LANSING</td> <td>3889</td> <td>-1456</td> </tr> <tr> <td>BKC</td> <td>4269</td> <td>-1836</td> </tr> <tr> <td>MISSISSIPPIAN</td> <td>4576</td> <td>-2093</td> </tr> <tr> <td>VIOLA</td> <td>4824</td> <td>-2391</td> </tr> <tr> <td>Arbuckle</td> <td>5302</td> <td>-2869</td> </tr> </tbody> </table>	Name	Top	Datum	ANHYDRITE	1642	+791	HEEBNER	3842	-1409	LANSING	3889	-1456	BKC	4269	-1836	MISSISSIPPIAN	4576	-2093	VIOLA	4824	-2391	Arbuckle	5302	-2869
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VIOLA	4824	-2391																							
Arbuckle	5302	-2869																							

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#	222'	Common	160	3%cc, 2%Gel
PRODUCTION	7-7/8"	5-1/2"	17#	5117'	SMD	175	

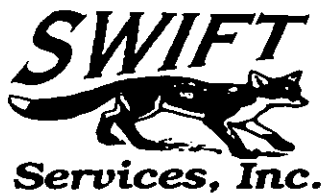
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ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Top Bottom OCT 29 2009 MGC			

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	5117' TO 5400'	1000 GAL 20% FE	SAME
		RECEIVED	
		OCT 29 2009	
		KCC WICHITA	

TUBING RECORD: Size: <u>2-3/8"</u> Set At: <u>5079'</u> Packer At: <u>5079'</u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <input checked="" type="checkbox"/> SWD	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours Oil Bbls. <u>N/A</u> Gas Mcf <u>N/A</u> Water Bbls. <u>N/A</u> Gas-Oil Ratio _____ Gravity _____	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CHARGE TO: American Warrior
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET
 No 17088

PAGE 1 OF 1

SERVICE LOCATIONS
 1. Ness City KS WELL/PROJECT NO. 5-26 LEASE J. Wright COUNTY/PARISH Hodgeman STATE KS CITY Ness City DATE 9-15 OWNER
 2. TICKET TYPE SERVICE SALES CONTRACTOR H-D Oilfield Service RIG NAME/NO. CO-198-2019 SHIPPED VIA Jetmore DELIVERED TO Jetmore ORDER NO.
 3. WELL TYPE Oil WELL CATEGORY Development JOB PURPOSE Cement Port Collar WELL PERMIT NO. WELL LOCATION Ness City 16S, 8W, 3S Eirk
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			UM			
575		1			MILEAGE Trk # 114	30	mi	5	00	150 00
576 D		1			Pump Charge Port Collar	1	ea	1100	00	1100 00
581		1			Service Charge Cement	175	sk	1	50	262 50
583		1			Drayage	260	TM	1	00	260 76
330		1			Swift Multi-Density Standard	140	sk	14	00	1960 00
276		1			Flocele	44	lbs	1/4	50	66 00
290		1			D-Air	1	gal	35	00	35 00
105		1			Port Collar Tool Rental w/man	1	ea	5 1/2	00	300 00
	KCC WICHITA OCT 29 2008 RECEIVED									

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 9-15-09 TIME SIGNED 830 AM PM

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?				4134 26
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL

Hodgeman
 TAX 6.45%
 152 28

4286 54

JOB LOG

SWIFT Services, Inc.

DATE 9-15-09 PAGE NO. 1

CUSTOMER
American Warrior

WELL NO.
5-26

LEASE
J. Wright

JOB TYPE
Cement Port Collar

TICKET NO.
17088

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								2 7/8 x 5 1/2 Port Collar @ 1648'
	830							On Location - Rig up
	920			✓			1000	Pressure Test - Held
	930	3		✓		400		Injection Rate
	935	4	0	✓		500		Start Cement 11.2ppg
CONFIDENTIAL		4	8	✓		400		Circulation at Surface
OCT 30 2009		4	69	✓		500		Cement to Surface
KCC		4	69	✓		500		Heavy Cement - 14.0ppg
	955	4	0	✓		500		Start Displacement
			5 1/2			200		Shut Down - Close Tool
	1000			✓		1000		Pressure Test - Tool Closed
								Run 4 JTs
			20	✓				Reverse Clean
								Wash Truck
	1045							Job Complete
								Thank you Brett, Dave, Rob

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CHARGE TO: AMERICAN WARRIOR INC.
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET
 No 16562

PAGE 1 OF 2

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SERVICE LOCATIONS 1. <u>Ness City Ks</u>	WELL/PROJECT NO. <u>S-26</u>	LEASE <u>WRIGHT J</u>	COUNTY/PARISH <u>HOBGOMAN</u>	STATE <u>Ks</u>	CITY <u>Ness City</u>	DATE <u>8-7-09</u>	OWNER <u>SAME</u>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>DUKE DRIG #5</u>	RIG NAME/NO. <u>!</u>	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>HOUSTON</u>	ORDER NO.	
3.	WELL TYPE <u>DISPOSAL</u>	WELL CATEGORY <u>DEVELOPMENT</u>	JOB PURPOSE <u>5 1/2" LONGSTRING</u>	WELL PERMIT NO.		WELL LOCATION <u>NW/JETTMOORE Ks</u>	
4.	INVOICE INSTRUCTIONS						
REFERRAL LOCATION							

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			UM			
575		1			MILEAGE #111	30	ME		5.00	150.00
578		1			PUMP CHARGE	1	JOB	5117	FT	1100.00
221		1			LITQUIN KCL	2	Gal		25.00	50.00
281		1			MUDEFLUSH	500	Gal		1.00	500.00
1102	KCC WICHITA OCT 2 9 2009 RECEIVED	1			CENTRALIZ 25	9	EA	5 1/2"	55.00	495.00
1103		1			CEMENT BASKETS	3	EA		180.00	540.00
1104		1			PORT COLLAR TOP JT # 81	1	EA	1648	FT	1900.00
1105		1			FORMATION PACK 25HOE	1	EA		1250.00	1250.00
1106		1			CATCH DOWN PLUG + RATTLE	1	EA		225.00	225.00

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 [Signature]
 DATE SIGNED 8-7-09 TIME SIGNED 1930
 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 #1	6510.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#2	3541.55
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 16562

CUSTOMER: AMERICAN WARRIOR INC. WELL: WRIGHT J 5-26 DATE: 8-7-09 PAGE 2 OF 12

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			QTY.	U/M	QTY.	U/M	
330		1				SWIFT MULTI-DENSITY STABORD	200	SKS	14.00		2800.00
276		1				FLOCCIE	50	UBS	1.50		75.00
290		1				D-ADR	2	GAL	35.00		70.00
581		1				SERVICE CHARGE		CUBIC FEET	1.50	200	300.00
583		1				PER MILE CHARGE		TON MILES	1.00	299.55	299.55
						TOTAL WEIGHT	19970	LOADED MILES		30	

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CONTINUATION TOTAL 3544.55

JOB LOG

SWIFT Services, Inc.

DATE 8-7-09 PAGE NO. 1

CUSTOMER AMERICAN WARRIOR INC WELL NO. S-26 LEASE WRIGHT J JOB TYPE 5/2 LONGSTRICK TICKET NO. 16562

CHART NO.	TIME	RATE (BPM)	VOLUME (BBLS/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1930							ON LOCATION
	2045							START 5/2" CASING IN WELL
								TD-5400 SET-5117
								TP-5117 5/2" 17
								SS-23'
								CENTRALIZERS - 1, 2, 3, 4, 5, 6, 8, 80, 82
								CMT BSKIS - 2, 7, 81
								PORT COLUER - 1648 TOP JT " 81
	2250	KICK			✓		1200	BREAK CIRCULATION - DROP BALL SET PACK SHOES
	2328	6	12		✓		500	PUMP 500 GAL MUD FLUSH
	2330	6	20		✓		500	PUMP 20 BBLS KCL FLUSH
	2337		7.5					PLUG RH - MH (15 SKS - 10 SKS SMD)
	2345	6	27		✓		500	MIX CEMENT - 75 SKS = 12.7 PPG
		6	16		✓			10 SKS = 13.5 PPG
		6	14		✓		300	50 SKS = 14.0 PPG
	2355							WASH OUT PUMP LINES
	2356							RELEASE LATCH DOWN AUG
	2357	7	0		✓			DISPLACE PLUG
	0015	6 1/2	118.2				1500	PLUG DOWN - PSE UP LATCH IN AUG
	0017						OK	RELEASE PSE - HELM
								WASH TRUCK
	0100							JOB COMPLETE

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KCC WICHITA

THANK YOU
WAYNE, BRITT, JEFF

ALLIED CEMENTING CO., LLC. 038528

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

3et 222 211.70

SERVICE POINT:

Great Bend

DATE <u>7-28-09</u>	SEC. <u>26</u>	TWP. <u>2</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION	JOB START <u>10:45</u>	JOB FINISH <u>11:15pm</u>
LEASE <u>Wright</u>		WELL# <u>5-26</u>		LOCATION <u>Jetmore 8W 7 1/2 N</u>		COUNTY <u>Hodgeman</u>	STATE <u>Ks</u>
OLD OR NEW (Circle one) <u>1/2 E Unit</u>							

CONTRACTOR Duke Drilling Rig #5
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 227
 CASING SIZE 5 1/8 DEPTH 222.70
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 13.22 bbl

OWNER _____
 CEMENT AMOUNT ORDERED 160 (on 39 cc)
29.61

EQUIPMENT OCT 28 2009
KCC
 PUMP TRUCK CEMENTER Shane
 # 181 HELPER Wayne
 BULK TRUCK # 344-170 DRIVER Galen
 BULK TRUCK # _____ DRIVER _____

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

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REMARKS:

Cement Circulated

CHARGE TO: American Warriors
 STREET _____
 CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME KENNETH MCGUIRE
 SIGNATURE Kenneth McGuire

TOTAL _____
 SERVICE _____
 DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD _____ @ _____
 _____ @ _____

TOTAL _____
PLUG & FLOAT EQUIPMENT
 _____ @ _____
 _____ @ _____
8 1/2 Wood Ry @ _____
 _____ @ _____
 TOTAL _____

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS