

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

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: Kevin Wiles Sr
Phone: (620) 275-2963
CONTRACTOR: License # 5929
Name: Duke Drilling Co.INC
Wellsite Geologist: Jim Musgrove
Purchaser: D/A

Designate Type of Completion:

- New Well Re-Entry Workover
 Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Corr, 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 #: _____

11-22-11 11-28-11 D/A 11-29-11
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 159-22,669-00-00

Spot Description: SE. sec 18-19s-9w

SW SE NE SE Sec. 18 Twp. 19 S. R. 9 East West
1,540 Feet from North / South Line of Section
335 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Rice

Lease Name: Meyeres-Link Well #: 1-18

Field Name: NA

Producing Formation: D/A

Elevation: Ground: 1732 Kelly Bushing: 1740

Total Depth: 3350 Plug Back Total Depth: NA

Amount of Surface Pipe Set and Cemented at: 356 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: 12000 ppm Fluid volume: 400 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 #: _____

RECEIVED

DEC 16 2011

KCC WICHITA

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: _____

Title: Production Supt. Date: 12-14-11

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dlg Date: 12/14/11

Operator Name: American Warrior INC Lease Name: Meyeres-Link Well #: 1-18
 Sec. 18 Twp. 19 S. R. 9 East West County: Rice

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 complete copy of all Electric Wire-line 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 checked="" type="checkbox"/> Yes <input 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 Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual IND, Micro, CDNL	<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:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Arbuckle</td> <td>3266</td> <td>-1526</td> </tr> </table>	Name	Top	Datum	Arbuckle	3266	-1526
Name	Top	Datum					
Arbuckle	3266	-1526					

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#	356	common	275	3%cc/2%gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
	D/A		

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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>D/A</u>
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ALLIED CEMENTING CO., LLC. 037772

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

SERVICE POINT:
Mohe Kalamazoo

DATE <u>11-29-11</u>	SEC. <u>18</u>	TWP. <u>19S</u>	RANGE <u>9W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:00am</u>	JOB FINISH <u>1:00pm</u>
LEASE <u>Memo Link</u>		WELL # <u>1-18</u>		LOCATION <u>Chase KS 2 1/2 N. west in fa.</u>		COUNTY <u>Rice</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Steve H Stephens
 TYPE OF JOB Plug
 HOLE SIZE 7 1/2" I.D.
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2" DEPTH 2266'
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER American Warrior
 CEMENT
 AMOUNT ORDERED 200 x 60:40:4 1/2:50 + 4 Floseal

COMMON	<u>120</u> SOCKS "A"	@ <u>16.25</u>	<u>\$1950.00</u>
POZMIX	<u>80</u> SOCKS	@ <u>8.50</u>	<u>680.00</u>
GEL	<u>7</u> SOCKS	@ <u>21.25</u>	<u>148.75</u>
CHLORIDE		@	
ASC		@	
Floseal	<u>52</u> #	@ <u>2.70</u>	<u>140.40</u>
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>207</u>	@ <u>2.25</u>	<u>465.75</u>
MILEAGE	<u>207 x .11 x 17</u>		<u>387.09</u>
TOTAL			<u>\$3771.99</u>

EQUIPMENT

PUMP TRUCK CEMENTER Matt Thimack
 # 360/265 HELPER Dawn Thimack
 BULK TRUCK
 # 344/170 DRIVER John (G.B.)
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:
pipe at 3266' load hole pump 10 bbls 1120 chad
MTR 355x disp 3 bbls 1120 disp 37 bbls mud.
pipe at 1200' load hole pump 10 bbls chad
MTR 355x disp 2 1/2 bbls 1120 disp 10 bbls mud.
pipe at 800' load hole pump 20 bbls chad
MTR 355x disp 8 bbls 1120
pipe at 400' pump 10 chad MTR 355x disp 3 bbls 1120
pipe at 60' MTR 252x
MTR 205x for Rottide
MTR 152x for MTR 205x

SERVICE

DEPTH OF JOB 3266'
 PUMP TRUCK CHARGE _____ 1250.-
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 34 @ 7.00 238.00
 MANIFOLD _____ @ _____
light vehicle 34 @ 4.00 136.00
 @ _____

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

TOTAL \$1624 RECEIVED

PLUG & FLOAT EQUIPMENT **DEC 16 2011**

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

KCC WICHITA

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.

TOTAL _____
 SALES TAX (If Any) _____
 TOTAL CHARGES net \$5395.99
 DISCOUNT 1532.76 708 mileage IF PAID IN 30 DAYS
1926.98 208
net \$3936.25

PRINTED NAME Steve H Stephens
 SIGNATURE Steve H Stephens

