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

	neo.	K.A.R. 82		- 135-23083	.00 . 00	
OPERATOR: License #: 4058 Name: American Warrior Inc.				API No. 15 - 135-23983 • 00 • 00		
Address 1: P.O. Box 399			1 '	Spot Description:		
Address 2:		4	330 Feet from North / South Line of Section 1,320 Feet from East / West Line of Section			
City: Garden City		l l				
Contact Person:Jody_Sr		I	Footages Calculated from Nearest Outside Section Corner:			
Phone: (620_) 275-29(rodayes	NE NW ✓ SE SW			
Type of Well: (Check one)	OG D&A Cathodia					
Water Supply Well	:	County	County: Ness Lease Name: Horchem Well #: 2			
ENHR Permit #:		Lease Name: Trototom well #; Z				
Is ACO-1 filed? ✓ Yes		I Date Men	Date Well Completed: 5/21/97 The plugging proposal was approved on: 1/11/12 (Date)			
Producing Formation(s): List A	_	me plugg	by: Daniel Berbasconi (KCC District Agent's Name)			
Mississippian Depth to		m: <u>4540 T.D. 4575</u>				
·	m: T.D	Plugging	Plugging Commenced: 1/1/1/12			
	m: T.D	1 Plugging	Plugging Completed:			
	•					
Show depth and thickness of a	all water, oil and gas forma	tions.				
Oil, Gas or Water Records Casi			Casing Record (Suri	g Record (Surface, Conductor & Production)		
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
Mississippian	water	Surface	85/8	224'	0	
		Production	51/2	4570'	0	
· · · · · · · · · · · · · · · · · · ·			31/2	4570	1	
cement or other plugs were us Set CIBP@ 4370w	sed, state the character of 1/2 sx cement on Cement circulat	same depth placed from (bott top. Ran tbg to ted to surface. Pl	tom), to (top) for eac 1830'. Swif ulled tbg. To	h plug set. t hooked Mixe opped 51/2 off	ed and pumped 170sx f with 5 sx. Mixed 25sx anding full.	
Plugging Contractor License #: 32382						
Address 1: P.O. Box 466						
City: Ness City			State:_ K	S	Zip: <u>67560</u> +	
Phone: (785) 798-23	300					
Name of Party Responsible fo	r Plugging Fees: Amel	rican Warrior Inc.				
State of Kansas	Finney	, ss.				
Jody Smith (Print Name)			[En			
being first duly swom on oath, the same are true and correct	says: That I have knowled	ge of the facts statements, ar	nd matters herein co	ntained, and the log of	f the above-described well is as filed, and RECEIVED	
Signature:	<u> </u>			 	1AN 0-0-201	