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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED ORIGINAL

DEC 01 2010

Form ACO-1
June 2009

KCC WICHITA

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

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

12/1/12

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 # 5822
Name: Val Energy
Wellsite Geologist: Roger Fisher
Purchaser: N/A

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Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- 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 #: _____

11/3/10	11/10/10	11/10/10
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 077-21, 707-0000
Spot Description: NE-SW-SW-SE
NE_SW_SW_SE Sec. 33 Twp. 33 S. R. 9 East West
353 Feet from North / South Line of Section
2,150 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Harper
Lease Name: Patterson Well #: 1-33
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 1306' Kelly Bushing: 1316'
Total Depth: 4600' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at: 357 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: 19,250 ppm Fluid volume: 87 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 #: _____

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: Geologist Date: 11/30/10

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: 12-1-10 - 12/1/12
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NJ Date: 12-7-10

Operator Name: American Warrior, Inc Lease Name: Patterson Well #: 1-33
 Sec. 33 Twp. 33 S. R. 9 East West County: Harper

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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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Heebner</td> <td>3440'</td> <td>-2124</td> </tr> <tr> <td>Stalnaker Sand</td> <td>3780'</td> <td>-2464</td> </tr> <tr> <td>Kansas City</td> <td>4031'</td> <td>-2715</td> </tr> <tr> <td>Stark</td> <td>4177'</td> <td>-2861</td> </tr> <tr> <td>Fort Scott</td> <td>4408'</td> <td>-3092</td> </tr> <tr> <td>Cherokee Shale</td> <td>4418'</td> <td>-3102</td> </tr> <tr> <td>Mississippi</td> <td>4539'</td> <td>-3223</td> </tr> </tbody> </table>	Name	Top	Datum	Heebner	3440'	-2124	Stalnaker Sand	3780'	-2464	Kansas City	4031'	-2715	Stark	4177'	-2861	Fort Scott	4408'	-3092	Cherokee Shale	4418'	-3102	Mississippi	4539'	-3223
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Cherokee Shale	4418'	-3102																							
Mississippi	4539'	-3223																							

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"	24#	357'	Common	165	Poz

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

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TUBING RECORD:	Size:	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 Gravity

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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 042253

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

SERVICE POINT:

Medicine Lodge

DATE <i>11-4-2010</i>	SEC <i>33</i>	TWP <i>33S</i>	RANGE <i>9W</i>	CALLED OUT <i>7:30 AM</i>	ON LOCATION <i>10:00 PM</i>	JOB START <i>11:00 AM</i>	JOB FINISH <i>11:30</i>
LEASE <i>Palmer</i>	WELL # <i>1-33</i>	LOCATION <i>Hartzman Co. Forest on Hwy 2</i>		COUNTY <i>Hopper</i>	STATE <i>Ks</i>		
OLD OR NEW (check one)				<i>to Carbon Pl, 2 South, lease line</i>			

CONTRACTOR <i>WGI #5</i>	OWNER <i>American Warr.or</i>
TYPE OF JOB <i>Surface</i>	
HOLE SIZE <i>12 1/4</i>	I.D. <i>3.58'</i>
CASING SIZE <i>8 5/8</i>	DEPTH <i>357'</i>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <i>20'</i>	
PERFS.	
DISPLACEMENT <i>21 bbls of Fresh Water</i>	
EQUIPMENT	
PUMP TRUCK CEMENTER <i>Dean F</i>	
# <i>414-302</i> HELPER <i>Ron G</i>	
BULK TRUCK	
# <i>301-260</i> DRIVER <i>Robert</i>	
BULK TRUCK	
#	DRIVER

CEMENT	AMOUNT ORDERED <i>275.34 60:40:12%G</i>
	<i>30%G</i>
COMMON <i>A</i>	<i>165.54 @ 15.43 2549.1</i>
POZMIX	<i>110.34 @ 8.00 880.01</i>
GEL	<i>5.44 @ 20.80 104.01</i>
CHLORIDE	<i>9.34 @ 52.20 523.80</i>
ASC	
HANDLING <i>187</i>	<i>@ 2.40 693.60</i>
MILEAGE <i>289 / 10/25</i>	<i>722.50</i>
TOTAL	<i>5473.1</i>

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REMARKS:

*Open bottom & break circulation pump
3 bbls fresh water down, then 200
of cement, shut down, release plug, set
displacement, pump 21 bbls of fresh
water, shut in, cement in circulation
to casing*

SERVICE

DEPTH OF JOB <i>357'</i>	
PUMP TRUCK CHARGE <i>1018.00</i>	
EXTRA FOOTAGE <i>57</i>	<i>@ .85 48.45</i>
MILEAGE <i>25</i>	<i>@ 7.25 175.00</i>
MANIFOLD	
<i>Hardware</i>	
TOTAL	<i>1241.4</i>

CHARGE TO: *American Warr.or*
STREET _____
CITY _____ STATE _____ ZIP _____

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PLUG & FLOAT EQUIPMENT

<i>Expansion Plug</i>	<i>@ 68.00</i>
TOTAL	<i>68.00</i>

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment
and furnish cementer and helper(s) to assist driver 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 *x A*
SIGNATURE *x Andy B*

SALES TAX (if Any) _____
TOTAL CHARGES *6782.60*
DISCOUNT *5086.95* IF PAID IN 30 DAYS

Thank You!!!

ALLIED CEMENTING CO., LLC. 042259

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

SERVICE POINT:
Medicine Lake, KS

DATE <u>11-10-2010</u>	SEC. <u>33</u>	TWP. <u>23S</u>	RANGE <u>9W</u>	CALLED OUT <u>9:20 AM</u>	ON LOCATION <u>5:30 PM</u>	JOB START <u>7:00 PM</u>	JOB FINISH <u>8:00 PM</u>
LEASE <u>Patterson</u>	WELL# <u>1-33</u>		LOCATION <u>Hazelton Cr. East on Hwy</u>	COUNTY <u>HARDY</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)			<u>2 to CROWN Rd, 2 south, Winto</u>				

CONTRACTOR U9145 OWNER American Warrior

TYPE OF JOB Rotary Aug

HOLE SIZE 7 7/8" T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH 1350'

TOOL _____ DEPTH _____

FRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 3 W940r, 10 mud

EQUIPMENT _____

PUMP TRUCK CEMENTER Darin E

414-202 HELPER Matt T

BULK TRUCK _____

364 DRIVER Rebert

BULK TRUCK _____

_____ DRIVER _____

CEMENT AMOUNT ORDERED 165 sk @ 60.40 = 9966

COMMON Class A 99sk @ 15.45 = 1579.55

POZ MIX 65 sk @ 8.00 = 528.00

GEL 6 sk @ 20.80 = 124.80

CHLORIDE _____

ASC _____

HANDLING 171 @ 2.40 = 410.40

MILEAGE 171/10/25 @ _____ = 427.50

TOTAL 3020.25

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REMARKS:

1st plug - 1350' - 8 hrs work ahead
mix 85% of cement Displace 8 hrs work
10 hrs mud, 2nd plug - 900' - 25 hrs
work ahead, mix 35% of cement, Displace
8 hrs work, 3rd plug - 600' - 10 hrs
work ahead, mix 25% of cement, Displace
2 hrs work, 4th plug - 60' - mix 25%
of cement, 5th plug - mix 15% of cement
mud hole - mix 10% of cement

CHARGE TO: American Warrior

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>1350'</u>	
PUMP TRUCK CHARGE	<u>1017</u>	
EXTRA FOOTAGE	@	
MILEAGE	<u>25</u>	@ <u>7.00</u> = <u>175.00</u>
MANIFOLD	@	
	@	
	@	

RECEIVED TOTAL 1192

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PLUG & FLOAT EQUIPMENT

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none

TOTAL _____

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 X

SIGNATURE X [Signature]

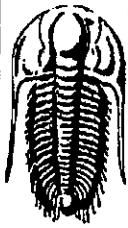
Thank You!!!

SALES TAX (if Any) _____

TOTAL CHARGES 4212.25

DISCOUNT _____ IF PAID IN 30 DAYS

NET 3369.80



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

American Warrior Inc.
 P.O. Box 399
 Garden City, KS 67846
 ATTN: Roger Fisher

PATTERSON #1-33
33-33s-9w-HARPER-KS
 Job Ticket: 39471 DST#: 1
 Test Start: 2010.11.09 @ 08:45:00

GENERAL INFORMATION:

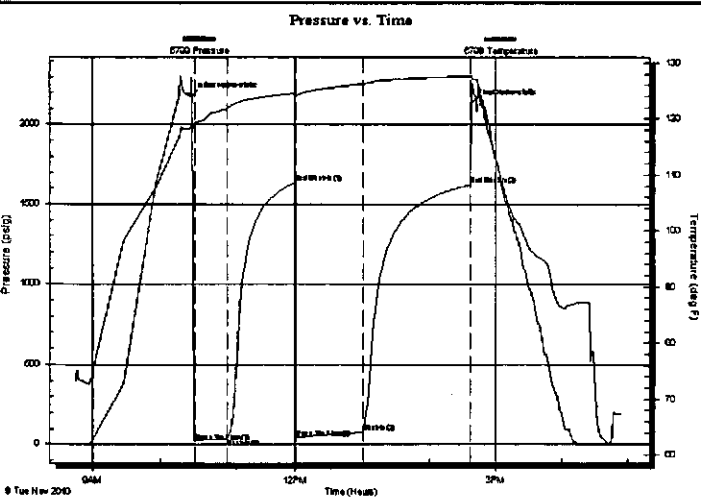
Formation: **MISSISSIPPIAN**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 10:31:20
 Time Test Ended: 16:56:00
 Interval: **4545.00 ft (KB) To 4569.00 ft (KB) (TVD)**
 Total Depth: **4569.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: Good

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Test Type: Conventional Bottom Hole
 Tester: Jake Fahrenbruch
 Unit No: 43
 Reference Elevations: 1316.00 ft (KB)
 1306.00 ft (CF)
 KB to GR/CF: 10.00 ft

Serial #: 6799 **Outside**
 Press@RunDepth: 80.08 psig @ 4546.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2010.11.09 End Date: 2010.11.09 Last Calib.: 2010.11.09
 Start Time: 08:45:05 End Time: 16:55:59 Time On Btm: 2010.11.09 @ 10:27:40
 Time Off Btm: 2010.11.09 @ 14:38:20

TEST COMMENT: IF: Fairly strong blow, built to BOB in 9 minutes.
 IS: Bled off, no blow back.
 FF: Fairly strong blow, built to BOB in 5.5 minutes.
 FS: Bled off, no blow back.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2177.70	118.18	Initial Hydro-static
4	21.90	119.23	Open To Flow (1)
33	39.38	121.75	Shut-In(1)
93	1635.83	124.54	End Shut-In(1)
94	45.11	124.11	Open To Flow (2)
153	80.08	126.24	Shut-In(2)
250	1625.21	127.68	End Shut-In(2)
251	2137.37	127.80	Final Hydro-static

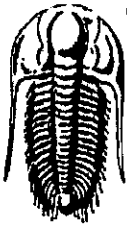
Recovery

Length (ft)	Description	Volume (bbl)
31.00	GCWCHOCM 10%g 15%w 20%o 55%h	0.43
62.00	GCOCMW 20%g 15%o 30%m 35%w	0.87
62.00	OS SMCW 1%o 5%m 94%w	0.87
0.00	1550' GIP	0.00
0.00	rw = .06ohm@72degF=145000ppmchl	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

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**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

American Warrior Inc.
P.O. Box 399
Garden City, KS 67846
ATTN: Roger Fisher

PATTERSON #1-33
33-33s-9w-HARPER-KS
Job Ticket: 39471 DST#: 1
Test Start: 2010.11.09 @ 08:45:00

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 10.00 lb/gal	Cushion Length: ft	Water Salinity:	145000 ppm
Viscosity: 57.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.19 in*	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 4000.00 ppm			
Filter Cake: inches			

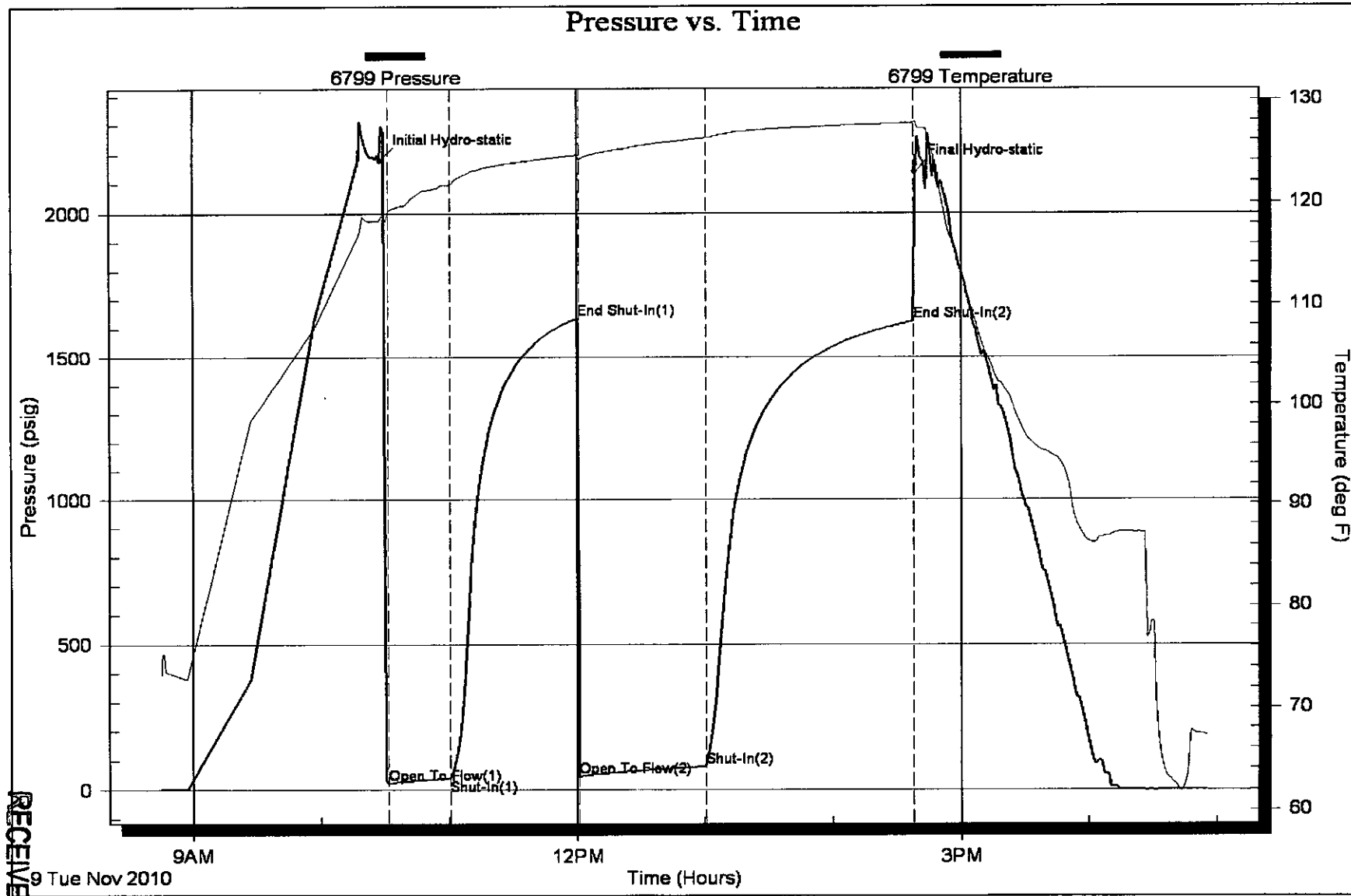
Recovery Information

Recovery Table

Length ft	Description	Volume bbl
31.00	GCWCHOCM 10%g 15%w 20%o 55%m	0.435
62.00	GCOCMV 20%g 15%o 30%m 35%w	0.870
62.00	OS SMCW 1%o 5%m 94%w	0.870
0.00	1550' GIP	0.000
0.00	rw = .06ohm@72degF=145000ppmchl	0.000

Total Length: 155.00 ft Total Volume: 2.175 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

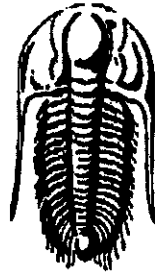
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**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Prepared For: **American Warrior Inc.**

P.O. Box 399
Garden City, KS 67846

ATTN: Roger Fisher

33-33s-9w Harper KS

PATTERSON #1-33

Start Date: 2010.11.09 @ 08:45:00

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Job Ticket #: 39471 DST #: 1

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Trilobite Testing, Inc
PO Box 1733 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

American Warrior Inc.

PATTERSON #1-33

P.O. Box 399
Garden City, KS 67846

33-33s-9w Harper KS

ATTN: Roger Fisher

Job Ticket: 39471

DST#: 1

Test Start: 2010.11.09 @ 08:45:00

GENERAL INFORMATION:

Formation: **MISSISSIPPIAN**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 10:31:20

Time Test Ended: 16:56:00

Test Type: Conventional Bottom Hole

Tester: Jake Fahrenbruch

Unit No: 43

Interval: **4545.00 ft (KB) To 4569.00 ft (KB) (TVD)**

Total Depth: 4569.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Good

Reference Elevations: 1316.00 ft (KB)

1306.00 ft (CF)

KB to GR/CF: 10.00 ft

Serial #: 6799

Outside

Press@RunDepth: 80.08 psig @ 4546.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2010.11.09

End Date: 2010.11.09

Last Calib.: 2010.11.09

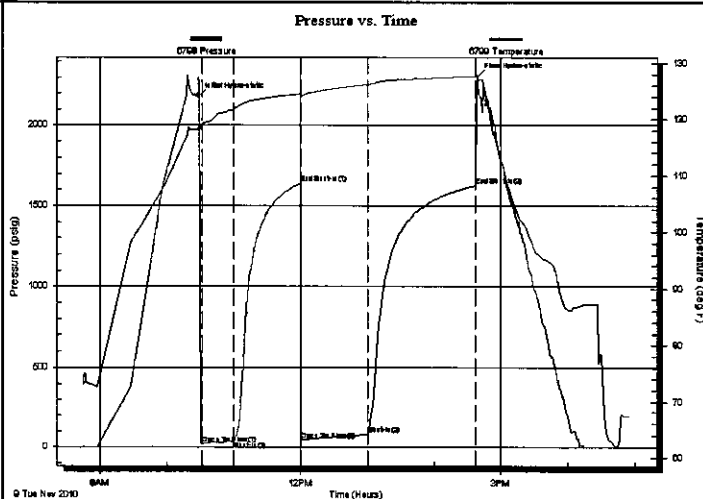
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PRESSURE SUMMARY

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250	1625.21	127.68	End Shut-In(2)
252	2304.27	127.21	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
62.00	OS SMCW 1%o 15%g 30%m 35%w	0.87
62.00	GCOOMW 20%g 15%o 30%m 35%w	0.87
31.00	GCWCHOCM 10%g 15%w 20%o 55%h	0.43
0.00	1550' GIP	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

American Warrior Inc.

PATTERSON #1-33

P.O. Box 399
Garden City, KS 67846

33-33s-9w Harper KS

ATTN: Roger Fisher

Job Ticket: 39471

DST#: 1

Test Start: 2010.11.09 @ 08:45:00

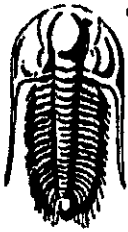
Tool Information

Drill Pipe:	Length: 4554.00 ft	Diameter: 3.80 inches	Volume: 63.88 bbl	Tool Weight: 2500.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 75000.00 lb
			Total Volume: 63.88 bbl	Tool Chased 0.00 ft
Drill Pipe Above KB:	29.00 ft			String Weight: Initial 60000.00 lb
Depth to Top Packer:	4545.00 ft			Final 62000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	24.00 ft			
Tool Length:	44.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Shut In Tool	5.00			4530.00	
Hydraulic tool	5.00			4535.00	
Packer	5.00			4540.00	20.00 Bottom Of Top Packer
Packer	5.00			4545.00	
Stubb	1.00			4546.00	
Recorder	0.00	8648	Inside	4546.00	
Recorder	0.00	6799	Outside	4546.00	
Perforations	18.00			4564.00	
Bullnose	5.00			4569.00	24.00 Bottom Packers & Anchor
Total Tool Length:	44.00				



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

American Warrior Inc.

PATTERSON #1-33

P.O. Box 399
Garden City, KS 67846

33-33s-9w Harper KS

Job Ticket: 39471 **DST#: 1**

ATTN: Roger Fisher

Test Start: 2010.11.09 @ 08:45:00

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 10.00 lb/gal	Cushion Length: ft	Water Salinity:	145000 ppm
Viscosity: 57.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.17 in ⁹	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 4000.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
62.00	OS SMCW 1%o 15%g 30%m 35%w	0.870
62.00	GCOCMW 20%g 15%o 30%m 35%w	0.870
31.00	GCWCHOCM 10%g 15%w 20%o 55%m	0.435
0.00	1550' GIP	0.000

Total Length: 155.00 ft Total Volume: 2.175 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments: RW=.06ohm@72degF=145000ppm chl

