

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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

1/26/13

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
Wellsite Geologist: Jason Alm/Harley Sayles
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 (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 #: _____

12/14/10 12/19/10 1/20/11
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 083-21, 688-0600
Spot Description: SW-NE-NW-NW
SW NE NW NW Sec. 36 Twp. 22 S. R. 23 East West
350 Feet from North / South Line of Section
700 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Hodgeman
Lease Name: Hodgeman-O'Brate Well #: 2-36
Field Name: Oppy South
Producing Formation: Mississippi
Elevation: Ground: 2267' Kelly Bushing: 2278'
Total Depth: 4484' Plug Back Total Depth: 4456'
Amount of Surface Pipe Set and Cemented at: 277 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1426 Feet
If Alternate II completion, cement circulated from: Surface
feet depth to: 1426' w/ 125 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 18,750 ppm Fluid volume: 97 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: *Neil Lisk*

Title: Geologist Date: 1/25/11

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KANSAS CORPORATION COMMISSION
KCC Office Use ONLY
 Letter of Confidentiality Received
Date: 1/26/11 - 1/26/13
 Confidential Release Date: CONSERVATION DIVISION
WICHITA, KS
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: *NS* Date: *2/8/11*

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Operator Name: American Warrior, Inc Lease Name: Hodgeman-O'Brate Well #: 2-36 JAN 26 2011
 Sec. 36 Twp. 22 S. R. 23 East West County: Hodgeman **CONFIDENTIAL**

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input 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;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Stone Corral</td> <td>1432'</td> <td>+846</td> </tr> <tr> <td>Base Stone Corral</td> <td>1465'</td> <td>+813</td> </tr> <tr> <td>Heebner</td> <td>3790'</td> <td>-1512</td> </tr> <tr> <td>Lansing</td> <td>3849'</td> <td>-1571</td> </tr> <tr> <td>Pawnee</td> <td>4322'</td> <td>-2044</td> </tr> <tr> <td>Mississippi</td> <td>4469'</td> <td>-2191</td> </tr> <tr> <td>Osage</td> <td>4478'</td> <td>-2200</td> </tr> </table>	Name	Top	Datum	Stone Corral	1432'	+846	Base Stone Corral	1465'	+813	Heebner	3790'	-1512	Lansing	3849'	-1571	Pawnee	4322'	-2044	Mississippi	4469'	-2191	Osage	4478'	-2200
Name	Top	Datum																							
Stone Corral	1432'	+846																							
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Mississippi	4469'	-2191																							
Osage	4478'	-2200																							

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#	277'	Common	165	3%cc2%gel
Production	7-7/8"	5-1/2"	17#	4479'	EA-2	125	

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 (Amount and Kind of Material Used)	Depth
		250 gal 20%MCA	4484'
RECEIVED KANSAS CORPORATION COMMISSION JAN 26 2011 CONSERVATION DIVISION WICHITA, KS			

TUBING RECORD:	Size: <u>2-3/8"</u>	Set At: <u>4479'</u>	Packer At:	Liner Run: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>N/A</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input 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 <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>4484'</u>
--	---	--------------------------------------

ALLIED CEMENTING CO., LLC.

SERVICE POINT: MB

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

DATE <u>12-11-10</u>	SEC. <u>36</u>	TWP. <u>22</u>	RANGE <u>33</u>	CALLED OUT <u>6:30 AM</u>	ON LOCATION <u>9:00 AM</u>	JOB STARTED <u>12:00 PM</u>	JOB FINISHED <u>12:00 PM</u>
WELL# <u>2-36</u>				LOCATION <u>Jetmore HE to Rd 223 1/4 N E 15</u>		COUNTY <u>Hodgeman</u>	STATE <u>K.S.</u>
LEASE <u>53 rate</u> OLD OR (NEW) (Circle one)							

CONTRACTOR Duke Drilling Rig '5 OWNER Mid Continent Resources

TYPE OF JOB Surface Job

HOLE SIZE 12 1/4 T.D. 280 #

CASING SIZE 8 5/8 DEPTH 277 #

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15 #

PERFS. _____

DISPLACEMENT 16.6

CEMENT AMOUNT ORDERED 165 # Com 27 cc
27 gal

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

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HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

EQUIPMENT

PUMP TRUCK # 181 CEMENTER Mike M

BULK TRUCK # 456-198 HELPER Mary

BULK TRUCK # _____ DRIVER Kevin W.

_____ DRIVER _____

REMARKS:

Rig was still drilling when got here
came out of hole with drill pipe
run surface pipe in hole
circulate hole + then mix
cement + displace it down
cement did circulate to
surface

SERVICE

DEPTH OF JOB 277 #

PUMP TRUCK CHARGE _____ @ _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD _____ @ _____

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WICHITA, KS
TOTAL _____

CHARGE TO: Mid-Continent Resources

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment
and furnish cementer and helper(s) to assist owner or
The above work was



CHARGE TO: American Warrior Inc.
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

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TICKET
 19367

PAGE 1 OF 2

SERVICE LOCATIONS
 1. Hays, Ks.
 2. Ness City, Ks.
 3. _____
 4. _____

WELL/PROJECT NO. 2-36 LEASE Hodgeson Obrite COUNTY/PARISH Hodgeson STATE Ks CITY _____ DATE 12-19-10 OWNER same

TICKET TYPE SERVICE SALES CONTRACTOR Duke #5 RIG NAME/NO. _____ SHIPPED VIA Truck DELIVERED TO Location ORDER NO. _____

WELL TYPE oil WELL CATEGORY Development JOB PURPOSE Logging WELL PERMIT NO. _____ WELL LOCATION _____

REFERRAL LOCATION _____ INVOICE INSTRUCTIONS _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DP		QTY.	UM	QTY.	UM	
575		1			MILEAGE ^{#111}	35	mi	5	00	175 00
578		1			Pump Change (Logging)	1	unit	1400	00	1400 00
221		1			KCL	2	gal	25	00	50 00
281		1			Mud Wash	500	gal	1	00	500 00
290		1			D-Air	2	gal	35	00	70 00
402		1			Centralizers	9	unit	55	00	495 00
403		1			Bucket	2	unit	200	00	400 00
405		1			Formation Packer Shoe	1	unit	1250	00	1250 00
406		1			L. D. Plug & Baffle	1	unit	225	00	225 00
407		1			Trivet Plug Shoe w/ L. D.	1	unit	275	00	275 00
404		1			Port Collar	1	unit	1900	00	1900 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 Kenneth McNamee
 DATE SIGNED 12-20-10 TIME SIGNED 0505 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	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				PAGE TOTAL 6740 00 page 2 2854 50 10594 50
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				

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket

SWIFT OPERATOR [Signature] APPROVAL _____

Thank You!



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

TICKET CONTINUATION

TICKET No. 19367

CUSTOMER American Warrior Inc WELL No. 2-36 DATE 12-19-10 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT	
		LOG	ACCT	DF									
325		2				Standard Cement	175	shs			12.00	2100.00	
276		2				Floccle	150	#	1/4	#	1.00	75.00	
283		2				Salt	850	#	10%		15	127.50	
284		2				Calseal	8	shs	5%		30.00	240.00	
292		2				Halad-322	100	#	1.75%		7.00	700.00	
581		2				SERVICE CHARGE					1.50	262.50	
587		2				MILEAGE CHARGE					1.00	319.50	

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CONTINUATION TOTAL 3554.50

JOB LOG

SWIFT Services, Inc.

DATE 12-19-10 PAGE NO. 1

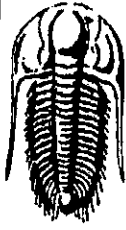
CUSTOMER American Warrior Inc WELL NO. 2-36 LEASE Hedgeman Obrate JOB TYPE Longstring TICKET NO. 19367

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	2240							04/00 sub w/FE
								RTD 4480'
								5 1/2" x 17 3/4" x 4481' x 21'
								Cent. 1, 3, 5, 7, 9, 11, 13, 15, 72
								Basket 16, 73
								PC 73 @ 1428'
	0130							start FE
	0225							Break Circ
	0400							1500 Set Plug Shoe
	0405	2.5	7/5					Plug RH+MH 50rks EA-2
	0415	4.5	0					300 start Mud flush
		4.5	12/0					300 start KCL flush
		5.5	70/0					350 Start Cement 125rks EA-2
	0427		30					End Cement
								Wash P/L
								Drop L.D. Plug
	0430	6	0					200 start Displacement
	0442	5	73					300 Catby Cement
	0448		103.5					1500 Land Plug
								Release Pressure
								Float Held

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Thank you
Mick, Josh F. & Joe



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

American Warrior, Inc.

Hodgeman-OBrate #2-36

PO Box 399
Garden City, KS. 67846

36-22s-23w-

Job Ticket: 41281

DST#: 1

ATTN: Jason Alm-Harley Saylty, KS. 67846

Test Start: 2010.12.19 @ 06:44:55

GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: **No Whipstock** ft (KB)
 Time Tool Opened: **09:02:25**
 Time Test Ended: **14:22:55**

Test Type: **Conventional Bottom Hole**
 Tester: **Jason McLemore**
 Unit No: **54**

Interval: **4418.00 ft (KB) To 4484.00 ft (KB) (TVD)**
 Total Depth: **4484.00 ft (KB) (TVD)**
 Hole Diameter: **7.80 inches** Hole Condition: **Good**

Reference Elevations: **2278.00 ft (KB)**
2267.00 ft (CF)
 KB to GR/CF: **11.00 ft**

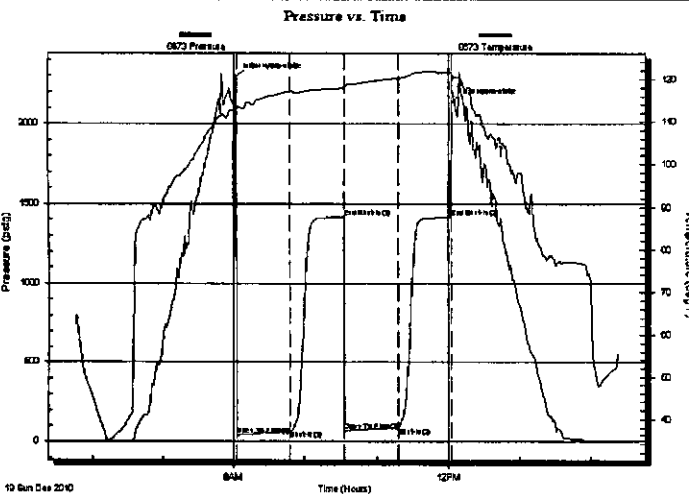
Serial #: 8673

Inside

Press@RunDepth: **86.66 psig @ 4455.00 ft (KB)**
 Start Date: **2010.12.19** End Date: **2010.12.19**
 Start Time: **06:44:57** End Time: **14:22:55**

Capacity: **8000.00 psig**
 Last Calib.: **2010.12.19**
 Time On Btm: **2010.12.19 @ 09:01:55**
 Time Off Btm: **2010.12.19 @ 12:02:40**

TEST COMMENT: IFP-Weak Blow ,Built to 5-1/2"
 ISI-Dead
 FFP-Fair Blow ,Built to 7"
 FSI-Dead



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2292.18	114.06	Initial Hydro-static
1	38.16	113.00	Open To Flow (1)
46	68.08	117.30	Shut-In(1)
91	1412.72	117.93	End Shut-In(1)
92	67.84	117.46	Open To Flow (2)
136	86.66	120.30	Shut-In(2)
181	1411.99	121.49	End Shut-In(2)
181	2130.69	121.83	Final Hydro-static

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Recovery

Length (ft)	Description	Volume (bbl)
70.00	Clean Oil	0.34
60.00	OCM-35%O-65%M	0.30
0.00	180' Gas In Pipe	0.00

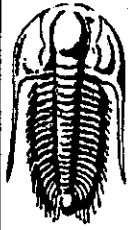
Gas Rates

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

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**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

American Warrior, Inc.

Hodgeman-OBrate #2-36

PO Box 399
Garden City, KS. 67846

36-22s-23w-

Job Ticket: 41281

DST#: 1

ATTN: Jason Alm-Harley Saylty, KS. 67846

Test Start: 2010.12.19 @ 06:44:55

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

36 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 45.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 13.59 in³

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 bbbl
70.00	Clean Oil	0.344
60.00	OCM-35%O-65%M	0.295
0.00	180' Gas In Pipe	0.000

Total Length: 130.00 ft Total Volume: 0.639 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

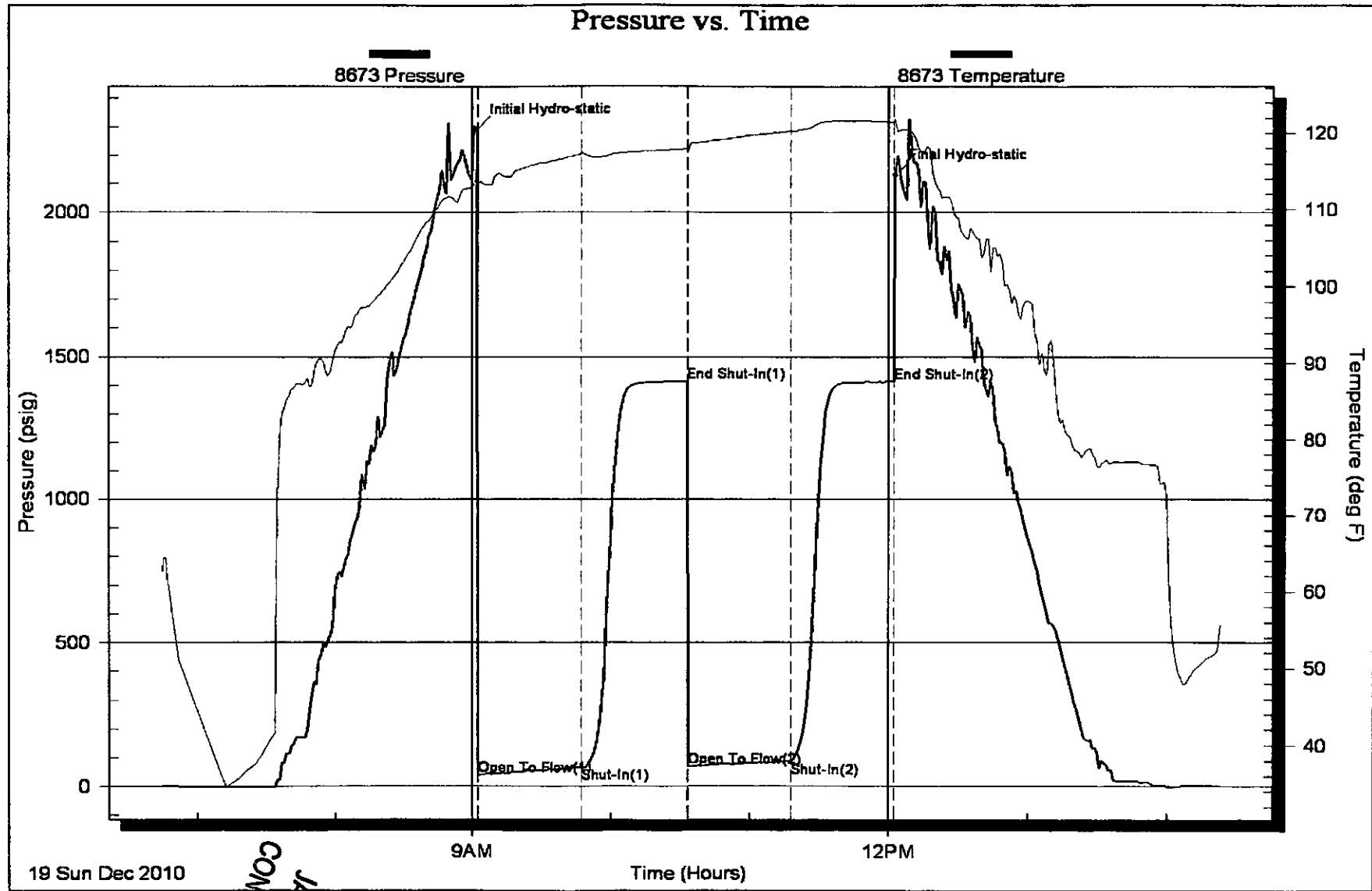
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

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