Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 30 days from plugging date.

KANSAS CORPORATION COMMISSION COMMISSION ON THE PROPERTY OF TH

WELL PLUGGING RECORD K.A.R. 82-3-117

September 2003 ype or Print on this Form Form must be Slaved All hisnes must be Filled

Lease Operator, American Warrior, Inc. Address: P.O. Box 399 Lease Name. Johnson Well Member: 1 Phone: (620) 275 - 2963 _ Operator License #: 4058 Spot Location (QQQQ): NE - NW - SW -Type of Well-Oil 15 100 (Oil. Gas D&A. SWD. ENHR. Water Sundly Well, Cathodic, Other) 2310 Feet from X North / South Section Line (If SWD or ENHIR) The plugging proposal was approved on: $\overset{10-22-03}{\ldots}$ _ Feet from | East / | West Section Line by: Richard Lacv __ (KCC District Acent's Name) Time 18 S. R. 21 East X West is ACO-1 filed? XYes No County: Ness If not, is well log attached? Yes No Date Well Completed: 11-20-81 Producing Formation(s): List All (If needed attach another sheet) Cherokee Death to Ton: 4200' Bottom: 4272' T.D. 4284' Plugging Commenced: 10-22-03 Depth to Too: __ Bottom: Plugging Completed: 10-22-03 T.D. Depth to Top: __ Bottom: __ Show depth and thickness of all water, oil and gas formations. Casing Record (Surface Conductor & Production) Oil. Gas or Water Records Pulled Out Formation Size Put In Content From To 4204 4209 8 5/8 287 None oil/water Cherokee 4 1/2 4280 None Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed end the method or methods used in introducing it into the hole. If coment or other plugs were used, state the character of same depth placed, from _______ feet to _______ feet each set. mixed & pumped 225 sacks of cement with 200# of hulls down casing, filled casing top to bottom, hook up to 8 5/8 and try to pump cement in, pressure up immediately, top off 4 1/2 casing with 1/2 barrel, casing full, well plugged. Name of Plugging Contractor Swift Services, Inc. Linenes #: 32382 Address: Ness City, KS 67560 Name of Party Responsible for Plugging Fees American Warrior, Inc. State of Kansas ____County, Ness 2. (Employee of Operator) of (Operator) on above-described well, being first duty Scott Corsair swom on cath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filled, and the same are true and correct, so help me God. (Signature). (Address) 210 Avenue A, Bazine, KS 67516 SUBSCRIBED and SWORN TO before me this 23rd day of October My Commission Expires:____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichite, Kansas 67202

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MY AOPL EXP.