

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 4058
 Name: American Warrior, Inc.
 Address: P.O. Box 399
 City/State/Zip: Garden City, KS 67846
 Purchaser: NCRA
 Operator Contact Person: Scott Corsair
 Phone: (785) 398-2270
 Contractor: Name: Discovery Drilling
 License: 31548
 Wellsite Geologist: Scott Corsair

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth _____
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

<u>1/26/01</u>	<u>2/2/01</u>	<u>12/2/01</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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 5-20-02
 MAY 20 2002
 KCC WICHITA

API No. 15- 135-24132
 County: Ness
 210 W. 30 N. C SE Sec. 27 Twp. 18 S. R. 21 East West
1350 feet from (S) / N (circle one) Line of Section
1530 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW

Lease Name: Jensen Well # 2
 Field Name: Ryensee NW
 Producing Formation: Mississippian
 Elevation: Ground: 2103' Kelly Bushing: 2111'
 Total Depth: 4175' Plug Back Total Depth: NA
 Amount of Surface Pipe Set and Cemented at 1331 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 ALL 1 EN B-6-02
 (Data must be collected from the Reserve Pit)
 Chloride content 12000 ppm Fluid volume 320 bbls
 Dewatering method used Evaporation
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

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.

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: Petroleum Engineer Date: 5/16/02
 Subscribed and sworn to before me this 16th day of May
2002
 Notary Public: Bernice Moore
 Date Commission Expires: 2/7/06

KCC Office Use ONLY

Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



Operator Name: American Warrior, Inc. Lease Name: Jensen Well #: 2
 Sec. 27 Twp. 18 S. R. 21 East West County: Ness

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite		+789
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Chase		-84
List All E. Logs Run:		Heebner	1322	-1449
		Lansing	2195	-1495
		Base Kansas City	3560	-1801
		Marmaton	3606	-1827
		Pawnee	3912	-1887
		Ft. Scott	3938	-1957
		Cherokee	3998	-1974
		Mississippian	4068	-2053
		RTD	4085	-2064
			4164	
			4175	

Dual Induction/ Dual Compensated Porosity Log

CASING RECORD <input type="checkbox"/> New <input checked="" 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	# Sacs Used	Type and Percent Additives
Surface	12 1/4	8 5/8	23 & 28	1331	SMDC	350	
Production	7 7/8	5 1/2	15.5	4172	SMDC	110	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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

TUBING RECORD	Size 2 3/8"	Set At 4150'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 12/2/01	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. 10	Gas Mcf	Water Bbls. 20	Gas-Oil Ratio 40

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval 4172-4175



CHARGE TO: *American Warrant*

ADDRESS

CITY, STATE, ZIP CODE

TICKET No 3257

PAGE 1 OF 2

ORIGINAL

SERVICE LOCATIONS <i>Ness, City, Mo.</i>	WELL/PROJECT NO. <i>#2</i>	LEASE <i>Jensen</i>	COUNTY/PARISH <i>Ness</i>	STATE <i>Ks.</i>	CITY	DATE <i>1-27-01</i>	OWNER <i>Sanc</i>
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>Discovery Drig.</i>	RIG NAME/NO. <i>Rig #1</i>	SHIPPED <i>VIT</i>	DELIVERED TO <i>Location</i>	ORDER NO.		
WELL TYPE <i>Oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cement Surface Csg.</i>	WELL PERMIT NO.		WELL LOCATION		
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE #103	20	mi.			2.50	50.00
576		1			Pump Service	1	ea			500.00	500.00
410		1			Top Plug	1	ea			56.00	56.00
402		1			Centralizers	2	ea			50.00	100.00
403		1			Cmt. Bore Kit	1	ea			160.00	160.00
412		1			Bottle	1	ea			50.00	50.00
581		1			Service Charge	350	h			1.00	350.00
533		1			Drayage	345.8	mi			0.75	259.35
330		1			SM Oc	350	h			9.00	3150.00
276		1			Floccle	90	#			0.90	81.00

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MAY 20 2002
MCC WICHITA

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 *[Signature]*

DATE SIGNED _____ TIME SIGNED _____ 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	PAGE TOTAL	4,931.35
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? WE UNDERSTOOD AND MET YOUR NEEDS? OUR SERVICE WAS PERFORMED WITHOUT DELAY?							
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO						TAX	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						TOTAL	

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!

JOB LOG

SWIFT Services, Inc. ORIGINAL

DATE 7-27-01 PAGE NO. 1

CUSTOMER *American Warrior* WELL NO. *112* LEASE *Jensen* JOB TYPE *Surface* TICKET NO. *3257*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	<i>17:30</i>							<i>On Loc.</i>
								<i>Rig Pulling Bit</i>
	<i>18:00</i>							<i>Start in hole with 8 7/8" csg.</i>
								<i>Cent on "1, "13</i>
								<i>Basket on "14</i>
	<i>20:00</i>							<i>Csg on Bottom Circulate</i>
	<i>20:15</i>							<i>mzr 350sk smoc</i>
			<i>83</i>					<i>150 sk @ 11.2 gal</i>
			<i>51</i>					<i>125 sk @ 12.2 gal</i>
			<i>21</i>					<i>75 sk @ 14.0 gal</i>
								<i>Finished mixing</i>
								<i>Release top Plug</i>
	<i>20:50</i>							<i>D. sol. 8 1/2"</i>
	<i>21:00</i>							<i>Plug down</i>

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CHARGE TO: *American Well*

ADDRESS

CITY, STATE, ZIP CODE: *Jardonia City KS*

TICKET No 3168

PAGE 1 OF 2

SERVICE LOCATIONS 1. <i>11/25/01</i>	WELL/PROJECT NO. 2	LEASE <i>Janson</i>	COUNTY/PARISH <i>Ness</i>	STATE <i>KS</i>	CITY	DATE <i>2-2-01</i>	OWNER <i>Same</i>
2.	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO.	SHIPPED VIA <i>105</i>	DELIVERED TO <i>Prine</i>	ORDER NO.	
4.	WELL TYPE <i>O.R.</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>2/3</i>	WELL-PERMIT NO.		WELL LOCATION	
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE		AMOUNT
		LOC	ACCT	DF								
575					MILEAGE <i>105</i>	<i>20</i>	<i>mi</i>			<i>2.50</i>		<i>50.00</i>
572					<i>Pump clamp</i>	<i>1</i>	<i>EA</i>	<i>4173</i>	<i>FT</i>			<i>1200.00</i>
220	RECEIVED MAY 20 2002 KCC/MIL/UTA				<i>Flock</i>	<i>500</i>	<i>gal</i>			<i>1.50</i>		<i>750.00</i>
299					<i>Rotating head</i>	<i>1</i>	<i>EA</i>					<i>100.00</i>
407					<i>insert blood shoe</i>	<i>1</i>	<i>EA</i>	<i>5 1/2 in</i>				<i>200.00</i>
402					<i>Brake lines</i>	<i>4</i>	<i>EA</i>			<i>40.00</i>		<i>160.00</i>
403					<i>CMT Basket</i>	<i>1</i>	<i>EA</i>			<i>110.00</i>		<i>110.00</i>
406					<i>atch Down Plug & Raffle</i>	<i>1</i>	<i>EA</i>					<i>200.00</i>
404					<i>Part collar</i>	<i>1</i>	<i>EA</i>					<i>100.00</i>
						<i>From Continuation</i>						

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *[Signature]*

DATE SIGNED: *2-2-01* TIME SIGNED: *1900* 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	PAGE TOTAL	<i>5534.46</i>
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
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. 3162

CUSTOMER American Warrior WELL Jansen # 2 DATE 2-2-01 PAGE 2 OF 2

ORIGINAL

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KCC WILMINGTON

PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		SUM		UNIT PRICE	AMOUNT	
		LOG	ACCT.	DF			QTY.	SUM	QTY.	SUM		QTY.	SUM
326						60/40 Poz	25	SKS			5.20	130	00
330						3mD	110	SKS			9.50	1045	00
277						Gilsonite	550	lbs			130	165	00
287						Gas Stop	200	lbs			4.50	900	00
276						Fluore	14	lbs			.70	12	60
285						CFR-2	50	lbs			2.75	137	50
290						D-AIR	50	lbs			2.75	137	50
581						SERVICE CHARGE					1.00	135	00
583						MILEAGE CHARGE					.75	101	36
											CONTINUATION TOTAL		271.446

CUBIC FEET 135
TON MILES 135.81
LOADED MILES 20