

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

RECEIVED
MAY 02 2002
KCC WICHITA ORIGINAL

Operator: License # 4058

Name: American Warrior, Inc.

Address: PO Box 399

City/State/Zip: Garden City, Kansas 67846-0399

Purchaser: NCRA

Operator Contact Person: Cecil O'Brate

Phone: (620) 275-9231

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Allen Downing

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>02-28-02</u>	<u>03-10-02</u>	<u>3-25-2002</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 033-21306-0000

County: Comanche County, Kansas

C-E/2 NW Sec. 27 Twp. 31 S. R. 20 East West

1200 feet from S (circle one) Line of Section

1800 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Karen Well #: 1

Field Name: NA

Producing Formation: MISS

Elevation: Ground: 1984.5 Kelly Bushing: 1997.5

Total Depth: 5360' Plug Back Total Depth: 5324'

Amount of Surface Pipe Set and Cemented at 602 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 161 @ 4.5-30.00
(Data must be collected from the Reserve Pit)

Chloride content 16,000 ppm Fluid volume 320 bbls

Dewatering method used Hauled Off-Site

Location of fluid disposal if hauled offsite: _____

Operator Name: KBW Oil & Gas

Lease Name: Harmon SWD License No.: 5993

Quarter NW Sec. 11 Twp. 33 S. R. 20 W East West

County: Comanche Docket No.: 98329

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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: _____

Title: Production Supt. Date: 4-30-2002

Subscribed and sworn to before me this 30th day of April

19 2002
Notary Public: Debra Purcell

Date Commission Expires: 11/4/03

DEBRA J. PURCELL
Notary Public - State of Kansas
My Appt. Expires 11/4/03

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED

Operator Name: American Warrior, Inc. Lease Name: Karen Well #: 1

Sec. 27 Twp. 31 S. R. 20 East West County: Comanche County, Kansas

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:
 CDNL/GR, Sonic, Micro,
 Dual Ind,

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Heebner	4132'	-2134'
Douglas	4220'	-2222'
Lansing	4316'	-2318'
Drum	4532'	-2534'
Swope	4673'	-2675'
BKC	4754'	-2756'
Marmaton	4818'	-2820'
Fort scott	4924'	-2926'
Cherokee	4934'	-2936'
Miss	5030'	-3032'

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
Conductor		20"		62'			
Surface	12-1/4"	8-5/8"	23#	602'	ALW Class A	225 100	3%cc 3%cc 2%gel
Production	7-7/8"	5-1/2"	15.5#	5357'	SMDC	125	2%cc 1/4# Flocele

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
2	5094'-5112', 5078'-5068', 5042'-5047'	3000Gals 20 % FE Acid	

TUBING RECORD Size 2-3/8" Set At 5300' Packer At None Liner Run Yes No

Date of First, Resumed Production, SWD or Enhr. SI Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil Bbls. SI Gas Mcf SI Water Bbls. SI Gas-Oil Ratio Gravity

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

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

Production Interval



CHARGE TO: American Wharrior
 ADDRESS _____
 CITY, STATE, ZIP CODE _____

TICKET No 4363

PAGE 1 OF 1

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1. SERVICE LOCATIONS <u>Neosho, Mo</u>	WELL/PROJECT NO. <u>#1</u>	LEASE <u>Karva</u>	COUNTY/PARISH <u>Comanche</u>	STATE <u>Ks.</u>	CITY	DATE <u>3-11-02</u>	OWNER <u>Same</u>
2.	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>Dave</u>	RIG NAME/NO. <u>Rig 7</u>	SHIPPED VIA <u>12:17</u>	DELIVERED TO <u>Location</u>	ORDER NO.	
3.	WELL TYPE <u>Gas</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Commit 5 1/2" Csg.</u>	WELL PERMIT NO.		WELL LOCATION <u>Sec 24-31-20</u>	
4. 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	70		mi		2.53	175.10
575		1			Pump Service	1		ea		1,200.00	1,200.00
407	RECEIVED MAY 02 2002 KCC WICHITA	1			Insert Float Shoe	1		ea	5 1/2	200.00	200.00
406		1			Latch Down Plug + Baffle	1		ea		200.00	200.00
402		1			Centralizers	6		ea		40.00	240.00
403		1			Bucket	1		ea		110.00	110.00
250		1			Floater	850		gal		1.27	1,079.50
		1			See Continuation						

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
 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
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		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL 6338

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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 [Signature]

Thank You!

CUSTOMER *Hanson Leasing* WELL NO. *41* LEASE *Karoo* JOB TYPE *Long Spring* TICKET NO. *4363*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0100							On loc.
	0130							Start in hole with 5 1/2 15.5" Ctg. Insert Float shoe
								KCC Latched down Bail Cable #1, "3, "5, "7, "9, "11 Bail on "6
	0345							Drop Bail
	0400							Ctg. on Bottom Casing hole
	0430							Plug main hole + Rat hole 250'
	0435		5					Pump 5" 1120 spool 850 gal Flochard 5" 1120 spool
			60					Start Mixing 100% Spine 2% Gas Stop, 1/2" CR, 1/4" Flood Finished mixing unit. pump + line
	0450							Start Displ. Latched down plug
	0515		126				1500	Plug down 1500 psi holding Release press. Dwell up works and cool up 10.0' 515 Complete

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[Handwritten signature]



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

TICKET CONTINUATION

TICKET No. 4363

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CUSTOMER <i>American Wholes</i>	WELL <i>Area "1"</i>	DATE <i>3/11/02</i>	PAGE <i>2</i>	OE <i>2</i>
------------------------------------	-------------------------	------------------------	------------------	----------------

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	FACCT	DF								
330		1				Swift-Mult: Devit, Cnts	125	cu			9.32	1187
387		1				Gas Stop	250	"			4.52	1135
285		1				CFR	50	"			2.75	137.50
276		1				Floork	31	"			2.70	87.90
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<p>KCC</p>												
<p>ORIGINAL</p>												
581		1				SERVICE CHARGE					1.25	1.25
583		1				MILEAGE CHARGE					1.768	1.768
							TOTAL WEIGHT	LOADED MILES		CUBIC FEET		
								70		125		
							MILEAGE CHARGE	TON MILES		335		16
								446.38		335		16

Please Return
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CONTINUATION TOTAL 2,938.06



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CEMENTING LOG

STAGE NO.

ORIGINAL

Date 2-28-02 District Med. C. C. Ticket No. 091043
 Company American Western Rig 1564-17
 Lease Kawa Well No. 1
 County Comanche State KS
 Location 10 Mile S. of 3/4 N 1/4 Field 27-36-20-1

CEMENT DATA:
 Spacer Type: _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG _____

CASING DATA: PTA Squeeze
 Surface Intermediate Production Liner
 Size 17 1/2 Type _____ Weight 24 Collar _____

LEAD: Pump Time _____ hrs. Type 1.25 130 64
3 7/8 110 Flt-221 Excess _____
 Amt. 27 Sks Yield 1.78 ft³/sk Density 12.8 PPG _____
 TAIL: Pump Time _____ hrs. Type A-32 204
2 7/8 4-1 Excess _____
 Amt. 100 Sks Yield 1.211 ft³/sk Density 18.2 PPG _____
 WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls.

Casing Depths: Top 603

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Pump Trucks Used 348 - Mas & B.
 Bulk Equip. 363 - F.T.C. H.

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size _____ T.D. _____ ft. P.B. to _____ ft.

Float Equip: Manufacturer _____
 Shoe: Type Latite White Depth _____
 Float: Type _____ Depth _____
 Centralizers: Quantity _____ Plugs Top TRP Btm. _____
 Stage Collars _____
 Special Equip. 2 Break-103
 Disp. Fluid Type Flow-110 Amt. 260 Bbls. Weight 2.24 PPG _____
 Mud Type None Weight 9.1 PPG _____

CAPACITY FACTORS:
 Casing: Bbls/Lin. ft. 267.7 Lin. ft./Bbl. 10.70
 Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Annulus: Bbls/Lin. ft. 10735 Lin. ft./Bbl. _____
 Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

COMPANY REPRESENTATIVE Ken McGee

CEMENTER David W

TIME AM/PM	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
1:15			58		27	10' of bottom plug cement
			10.7		58	10' of lead cement
					58	10' of tail cement
					27	Displace w/ fresh 110
1:50			30		3	1/2 of Rate
			36		3	Run plug cement
						10' of lead cement

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COPY

ALLIED CEMENTING CO., INC.

09043

Federal Tax I.D.# 48-0727860

MAY 13 2004

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

SERVICE POINT:

From Medicine LLC
Confidential

DATE: <u>2-28-02</u>	SEC. <u>27</u>	TWP. <u>21c</u>	RANGE <u>20W</u>	CALLED OUT <u>2:00 P.M.</u>	ON LOCATION <u>11:00 P.M.</u>	JOB START <u>1:45 P.M.</u>	JOB FINISH <u>6:15 P.M.</u>
LEASE <u>K...</u>	WELL # <u># 1</u>	LOCATION <u>Calubates Calwash</u>			COUNTY <u>...</u>	STATE <u>...</u>	
OLD OR NEW (Circle one)			<u>To Stop 5 ga. 3 1/2 N 1/2 T</u>				

CONTRACTOR ...
 TYPE OF JOB ...
 HOLE SIZE 12 1/2 T.D. 105
 CASING SIZE 8 7/8 DEPTH 103
 TUBING SIZE DEPTH
 DRILL PIPE 1 1/2 DEPTH 105
 TOOL DEPTH
 PRES. MAX ... MINIMUM
 MEAS. LINE SHOE JOINT 117 1/2
 CEMENT LEFT IN CSG. 12.18 FT
 PERFS.
 DISPLACEMENT ...

OWNER ...
 CEMENT
 AMOUNT ORDERED 22 boxes 10' 2 1/2" x 3 1/2"
CC + 1/2" Flow - at 1000' A 100' out
2 1/2" 10'

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE **KCC** _____ @ _____
 _____ @ _____
APR 30 2004 @ _____
CONFIDENTIAL @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

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EQUIPMENT
 PUMP TRUCK CEMENTER ...
 # 313 HELPER ...
 BULK TRUCK
 # 313 DRIVER ...
 BULK TRUCK
 # DRIVER

TOTAL _____

REMARKS:

SERVICE

...
...
...
...
...

DEPTH OF JOB 103
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 PLUG RAPP-C _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

CHARGE TO: ...
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

1 P. F. B. 10' @ _____
2 P. S. H. 10' @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE ...

...
 PRINTED NAME

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From

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State of Kansas
Kansas Corporation Commission
130 S. Market - Room 2078
Wichita, Kansas 67202

KCC

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Dear Corporation Commission,

American Warrior, Inc. request that you please hold the enclosed information confidential for as long as the law allows.

Thank you.

Sincerely,

Kevin Wiles, Sr
Production Manager

KW/kk
enclosure

American Warrior, Inc.

P.O. Box 200 • Garden City, MO 64303