

CONFIDENTIAL

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

ORIGINAL

3/15/14
Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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: James Musgrove
Purchaser: NCRA

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 #: _____

12-13-11	12-19-11	2-23-12
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 159-22,672-00-00
Spot Description: NE. sec. 24-19s-10w
SW SW NE NE Sec. 24 Twp. 19 S. R. 10 East West
1,275 Feet from North / South Line of Section
100 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Rice
Lease Name: Kathy Well #: 2-24
Field Name: Chase-Silica
Producing Formation: Arbuckle
Elevation: Ground: 1739 Kelly Bushing: 1747
Total Depth: 3400 Plug Back Total Depth: 3370
Amount of Surface Pipe Set and Cemented at: 353 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: 12000 ppm Fluid volume: 400 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 #: _____

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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 1000, 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: _____
Title: Production SUPT. Date: 3-14-12

KCC Office Use ONLY

Letter of Confidentiality Received
Date: 3/15/12 - 3/15/14
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NJ Date: 3-20-12

Operator Name: American Warrior INC Lease Name: Kathy Well #: 2-24
 Sec. 24 Twp. 19 S. R. 10 East West County: Rice

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Micro, DIL. DCPL.	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>Heebner</td> <td>2789</td> <td>-1042</td> </tr> <tr> <td>Toronto</td> <td>2814</td> <td>-1067</td> </tr> <tr> <td>Douglas</td> <td>2824</td> <td>-1077</td> </tr> <tr> <td>Lansing</td> <td>2958</td> <td>-1201</td> </tr> <tr> <td>BKC</td> <td>3225</td> <td>-1478</td> </tr> <tr> <td>Arbuckle</td> <td>3282</td> <td>-1535</td> </tr> </tbody> </table>	Name	Top	Datum	Heebner	2789	-1042	Toronto	2814	-1067	Douglas	2824	-1077	Lansing	2958	-1201	BKC	3225	-1478	Arbuckle	3282	-1535
Name	Top	Datum																				
Heebner	2789	-1042																				
Toronto	2814	-1067																				
Douglas	2824	-1077																				
Lansing	2958	-1201																				
BKC	3225	-1478																				
Arbuckle	3282	-1535																				

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	275	3% cc& 2% gel
Production	7-7/8"	5-1/2"	14#	3399	EA-2	150	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 <i>(Amount and Kind of Material Used)</i>	Depth
4	3285'-3292	500 gals 15% MCA	same
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TUBING RECORD: Size: <u>2-3/8"</u> Set At: <u>3360</u> Packer At: <u>none</u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
Date of First, Resumed Production, SWD or ENHR. <u>SI</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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Oil Bbls.</td> <td>Gas Mcf</td> <td>Water Bbls.</td> <td>Gas-Oil Ratio</td> <td>Gravity</td> </tr> <tr> <td><u>SI</u></td> <td><u>SI</u></td> <td><u>SI</u></td> <td> </td> <td> </td> </tr> </table>	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	<u>SI</u>	<u>SI</u>	<u>SI</u>		
Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity							
<u>SI</u>	<u>SI</u>	<u>SI</u>									

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 type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3276'-3280'</u>
--	--	--

ALLIED CEMENTING CO., LLC. 042382

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

SERVICE POINT:

*7200 2nd St. NE
2-18-11*

DATE <i>12-13-11</i>	SEC <i>24</i>	TWP <i>19S</i>	RANGE <i>10W</i>	CALLED OUT	ON LOCATION	JOB START <i>7:30 AM</i>	JOB FINISH <i>5:00 PM</i>
LEASE <i>Kathy</i>	WELL # <i>2-24</i>	LOCATION <i>Chase, KS - west,</i>			COUNTY <i>Rice</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one)		<i>1/2 north, west into</i>					

CONTRACTOR *Duke Rig #8* OWNER *American Warrior*

TYPE OF JOB *Surge*

HOLE SIZE *12 1/4* TD *357*

CASING SIZE *8 7/8* ID# DEPTH *254*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. *15 ft.*

PERFS.

DISPLACEMENT

CEMENT AMOUNT ORDERED *275 sks Class A*
30% cc 20% qs

COMMON	<i>275</i>	@ <i>16.25</i>	<i>4,468.75</i>
POZMIX		@	
GEL	<i>5</i>	@ <i>21.25</i>	<i>106.25</i>
CHLORIDE	<i>10</i>	@ <i>58.20</i>	<i>582.00</i>
ASC		@	
HANDLING	<i>275 90</i>	@ <i>2.25</i>	<i>612.50</i>
MILEAGE	<i>290 x 18 x 11</i>		<i>574.20</i>
TOTAL			<i>6383.70</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Greg R*

398 HELPER *Shane K*

BULK TRUCK DRIVER *John P*

344/1170

BULK TRUCK DRIVER

REMARKS:

*Pipe on bottom - Break circulation
w/ rig up 3. Hook up MILK 275
sk Class A 30% cc 20% qs. Shut
down release plug and replace w/
26.79 bbls. fresh water. Shut in
cement and circulate
rig down.*

Plug down @ 5:00 AM

SERVICE

DEPTH OF JOB	<i>357</i>		
PUMP TRUCK CHARGE	<i>0-300'</i>		<i>1125.00</i>
EXTRA FOOTAGE		@	
MILEAGE		@	
MANIFOLD		@	
HVM-34	<i>R/T</i>	@ <i>7.00</i>	<i>252.00</i>
Lvm-34	<i>R/T</i>	@ <i>4.00</i>	<i>144.00</i>
TOTAL			<i>521.00</i>

CHARGE TO: *American Warrior*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<i>LeWood Plug</i>	@ <i>92.00</i>	<i>92.00</i>
	@	
	@	
	@	
	@	
TOTAL		<i>92.00</i>

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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 *Steve H Stephens*

SIGNATURE *Steve H Stephens*

Thank you!

SALES TAX (If Any)		
TOTAL CHARGES	<i>7996.70</i>	
DISCOUNT	<i>7082.00</i>	<i>2084.67</i>
IF PAID IN 30 DAYS		

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

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TICKET No 21158

PAGE 1 OF 1
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SERVICE LOCATIONS	WELL/PROJECT NO.	LEASE	COUNTY/PARISH	STATE	CITY	DATE	OWNER
1. <u>HAMS</u>	<u>024</u>	<u>HAZAY</u>	<u>RICE</u>	<u>MS</u>		<u>12-19-11</u>	
2. <u>NESS</u>	TICKET TYPE	CONTRACTOR	RIG NAME/NO.	SHIPPED VIA	DELIVERED TO	ORDER NO.	
	<input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES		<u>JIMMIE # 8</u>	<u>CT.</u>	<u>CHASE</u>		
3.	WELL TYPE	WELL CATEGORY	JOB PURPOSE	WELL PERMIT NO.	WELL LOCATION		
	<u>OK</u>	<u>DEVELOP</u>	<u>SKIDSTEER</u>	<u>15159-20672</u>	<u>524719RD</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
<u>575</u>		<u>1</u>			<u>MILEAGE #112</u>	<u>70</u>	<u>mi</u>			<u>6.00</u>	<u>420</u>	<u>00</u>
<u>578</u>		<u>1</u>			<u>PUMP SERVICE</u>	<u>1</u>	<u>EA</u>			<u>1500</u>	<u>00</u>	<u>1500</u>
<u>021</u>		<u>1</u>			<u>LIQUIDACE</u>	<u>2</u>	<u>Gal</u>			<u>25</u>	<u>00</u>	<u>50</u>
<u>281</u>		<u>1</u>			<u>MUD FLUSH</u>	<u>500</u>	<u>Gal</u>			<u>1.25</u>	<u>625</u>	<u>00</u>
<u>290</u>		<u>1</u>			<u>DRILL</u>	<u>2</u>	<u>Gal</u>			<u>35</u>	<u>00</u>	<u>70</u>
<u>402</u>		<u>1</u>			<u>CENTRALIZED</u>	<u>6</u>	<u>EA</u>	<u>5 1/2</u>	<u>Gal</u>	<u>70</u>	<u>00</u>	<u>420</u>
<u>403</u>		<u>1</u>			<u>BAGNET</u>	<u>1</u>	<u>EA</u>			<u>250</u>	<u>00</u>	<u>250</u>
<u>406</u>		<u>1</u>			<u>LATCHDOWN PLUG & Baffle</u>	<u>1</u>	<u>EA</u>			<u>250</u>	<u>00</u>	<u>250</u>
<u>407</u>		<u>1</u>			<u>INSECT FLOWERSIDE w/ AUTO FILL</u>	<u>1</u>	<u>EA</u>			<u>350</u>	<u>00</u>	<u>350</u>

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 12-19-11 TIME SIGNED 1400 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	AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				<u>1/1</u>	<u>5935</u>
WE UNDERSTOOD AND MET YOUR NEEDS?				<u>1/2</u>	<u>4870</u>
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				<u>sub</u>	
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				<u>TOTAL</u>	<u>8805</u>
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				<u>Rice TAX 7.3%</u>	<u>430</u>
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	9236

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. 21158

CUSTOMER **AWI** WELL **224, HATHY** DATE **12-19-11** PAGE **2** OF **2**

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		QTY		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF			QTY	L/M	QTY	L/M			
225		2				STD EA-2	175	54			13.50	2362	50
276		2				FLOCELE	50	40			2.00	100	00
283		2				SAT	850	40			20	170	00
284		2				CASEN	8	54			35.00	280	00
292		2				HARAD-322	125	40			7.25	918	75
581		2				SERVICE CHARGE	175	54			2.00	350	00
583		2				DRAINAGE	639.63	70			1.00	639	63
SERVICE CHARGE							CUBIC FEET						
MILEAGE (CHARGE)							TOTAL WEIGHT		LOADED MILES		TON MILES		

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CONTINUATION TOTAL **4870.88**

JOB LOG

SWIFT Services, Inc.

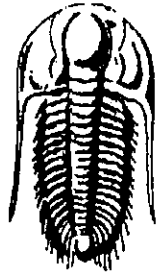
DATE 12-19-11 PAGE NO. 7

CUSTOMER *AWI* WELL NO. *2-24* LEASE *MATHY* JOB TYPE *LONGSTRIK* TICKET NO. *21158*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	<i>1400</i>							<i>ONLOCATION</i> <i>CMT: 175 STD EA 2</i>
								<i>R20 3400 SEY PIPE 3399 SJ 20.29.205173376</i> <i>5 1/4" #38 OUT, RUN 8200 WTS</i> <i>CENT 2,4,6,9,11,13 BAROT 3</i>
	<i>1530</i>							<i>START CSIN FLOAT CURV</i> <i>TAC APPROX DROF BALL</i>
	<i>1700</i>							<i>BOEANCILC 4 1/2 IG</i> <i>PLUG RH30, MH 20</i>
	<i>1740</i>	<i>5.5</i>	<i>12</i>				<i>200</i>	<i>500 MWD FLUSH</i>
		<i>5</i>	<i>20</i>				<i>5</i>	<i>2000 MWD FLUSH</i>
			<i>30.5</i>					<i>1250 WTS STD EA 2 CMT</i> <i>DROF LA PLUG</i>
		<i>6.0</i>	<i>0</i>				<i>200</i>	<i>START DISJ</i>
			<i>70</i>				<i>500</i>	
			<i>75</i>				<i>600</i>	
			<i>80</i>				<i>700</i>	
	<i>1830</i>		<i>82.3</i>				<i>1400</i>	<i>LAND</i> <i>RELEASED BY</i>
	<i>1915</i>							<i>TDS COMPLETE</i> <i>THANK YOU!</i> <i>DAVE BOB LUB</i>

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**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Prepared For: **American Warrior Inc**

PO Box 399
Garden City KS 67846

ATTN: Cecil O Brate

Kathy #2-24

24-19s-10w Rice,KS

Start Date: 2011.12.18 @ 12:02:53

End Date: 2011.12.18 @ 18:54:23

Job Ticket #: 46241 DST #: 1

Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

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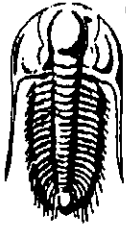
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Printed: 2011.12.21 @ 11:00:41

American Warrior Inc 24-19s-10w Rice,KS Kathy #2-24 DST # 1 Arbuckle 2011.12.18



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

American Warrior Inc
 PO Box 399
 Garden City KS 67846
 ATTN: Cecil O Brate

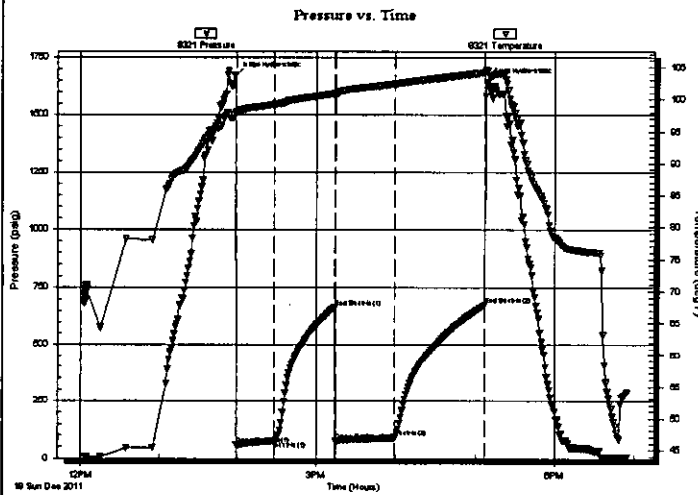
24-19s-10w Rice, KS
Kathy #2-24
 Job Ticket: 46241 DST#: 1
 Test Start: 2011.12.18 @ 12:02:53

GENERAL INFORMATION:

Formation: **Arbuckle**
 Deviated: **No** Whipstock: ft (KB)
 Time Tool Opened: 13:58:53
 Time Test Ended: 18:54:23
 Interval: **3205.00 ft (KB) To 3284.00 ft (KB) (TVD)**
 Total Depth: **3284.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: **Good**
 Test Type: **Conventional Bottom Hole (Initial)**
 Tester: **Jeff Brown**
 Unit No: **44**
 Reference Elevations: **1747.00 ft (KB)**
1739.00 ft (CF)
 KB to GR/CF: **8.00 ft**

Serial #: 8321 Inside
 Press@RunDepth: **90.35 psig @ 3273.00 ft (KB)** Capacity: **8000.00 psig**
 Start Date: **2011.12.18** End Date: **2011.12.18** Last Calib.: **2011.12.18**
 Start Time: **12:02:54** End Time: **18:54:23** Time On Btm: **2011.12.18 @ 13:58:23**
 Time Off Btm: **2011.12.18 @ 17:07:53**

TEST COMMENT: IFF-Fair blow built to 9 1/2 in
 ISI-Weak surface blow back
 FFF-Fair blow built to 9 1/2 in
 FSI-Weak surface blow back



PRESSURE SUMMARY

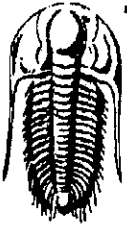
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1670.57	97.97	Initial Hydro-static
1	57.47	97.92	Open To Flow (1)
30	73.63	99.17	Shut-In(1)
76	659.86	100.84	End Shut-In(1)
76	75.51	100.74	Open To Flow (2)
121	90.35	102.33	Shut-In(2)
188	672.33	104.15	End Shut-In(2)
190	1643.96	104.56	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
43.00	OCGM 10%G20%O70%M	0.60
20.00	HOCM 45%O55%M	0.28
10.00	Gassy Oil 35%G65%O	0.14
0.00	157-GIP	0.00

Gas Rates

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



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

American Warrior Inc
 PO Box 399
 Garden City KS 67846
 ATTN: Cecil O Brate

24-19s-10w Rice, KS
 Kathy #2-24
 Job Ticket: 46241 DST#: 1
 Test Start: 2011.12.18 @ 12:02:53

GENERAL INFORMATION:

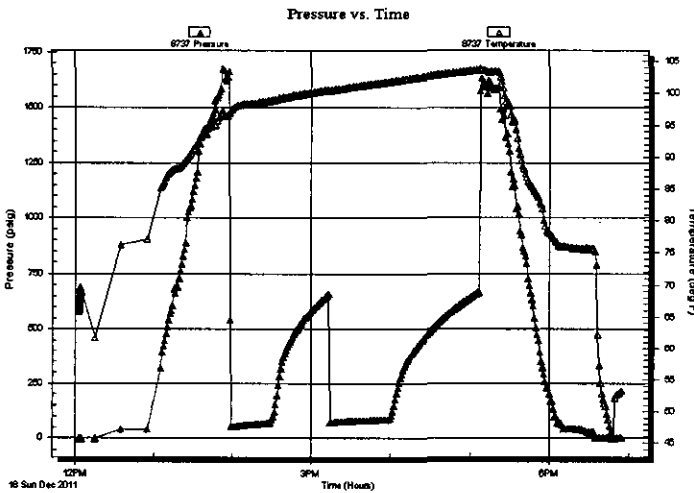
Formation: **Arbuckle**
 Deviated: **No Whipstock** ft (KB) Test Type: **Conventional Bottom Hole (Initial)**
 Time Tool Opened: **13:58:53** Tester: **Jeff Brown**
 Time Test Ended: **18:54:23** Unit No: **44**
 Interval: **3205.00 ft (KB) To 3284.00 ft (KB) (TVD)** Reference Elevations: **1747.00 ft (KB)**
 Total Depth: **3284.00 ft (KB) (TVD)** **1739.00 ft (CF)**
 Hole Diameter: **7.88 inches** Hole Condition: **Good** KB to GR/CF: **8.00 ft**

Serial #: 8737

Outside

Press@RunDepth: psig @ 3273.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.12.18 End Date: 2011.12.18 Last Calib.: 2011.12.18
 Start Time: 12:02:58 End Time: 18:54:27 Time On Btrnt
 Time Off Btrnt

TEST COMMENT: IFF-Fair blow built to 9 1/2 in
 ISI-Weak surface blow back
 FFP-Fair blow built to 9 1/2 in
 FSI-Weak surface blow back



PRESSURE SUMMARY

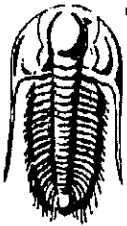
Time (Mn.)	Pressure (psig)	Temp (deg F)	Annotation

Recovery

Length (ft)	Description	Volume (bbi)
43.00	OCGM 10%G20%O70%M	0.60
20.00	HOCM 45%O55%M	0.28
10.00	Gassy Oil 35%G65%O	0.14
0.00	157-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
PO Box 399
Garden City KS 67846

ATTN: Cecil O Brate

24-19s-10w Rice,KS
Kathy #2-24
Job Ticket: 46241 **DST#: 1**
Test Start: 2011.12.18 @ 12:02:53

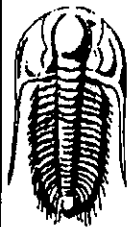
Tool Information

Drill Pipe:	Length: 3200.00 ft	Diameter: 3.80 inches	Volume: 44.89 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 2.70 inches	Volume: 0.00 bbl	Weight set on Packer: 20000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 2.25 inches	Volume: 0.00 bbl	Weight to Pull Loose: 42000.00 lb
			<u>Total Volume: 44.89 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	15.00 ft			String Weight: Initial 36000.00 lb
Depth to Top Packer:	3205.00 ft			Final 36000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	79.00 ft			
Tool Length:	99.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			3186.00	
Shut In Tool	5.00			3191.00	
Hydraulic tool	5.00			3196.00	
Packer	4.00			3200.00	20.00 Bottom Of Top Packer
Packer	5.00			3205.00	
Stubb	1.00			3206.00	
Perforations	3.00			3209.00	
Change Over Sub	1.00			3210.00	
Drill Pipe	62.00			3272.00	
Change Over Sub	1.00			3273.00	
Recorder	0.00	8321	Inside	3273.00	
Recorder	0.00	8737	Outside	3273.00	
Perforations	8.00			3281.00	
Bullnose	3.00			3284.00	79.00 Bottom Packers & Anchor

Total Tool Length: 99.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

American Warrior Inc
 PO Box 399
 Garden City KS 67846
 ATTN: Cecil O Brate

24-19s-10w Rice, KS
Kathy #2-24
 Job Ticket: 46241 **DST#: 1**
 Test Start: 2011.12.18 @ 12:02:53

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	43 deg API
Mud Weight: 10.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 53.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.59 in ³	Gas Cushion Type:		
Resistivity: ohm m	Gas Cushion Pressure: psig		
Salinity: 7100.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

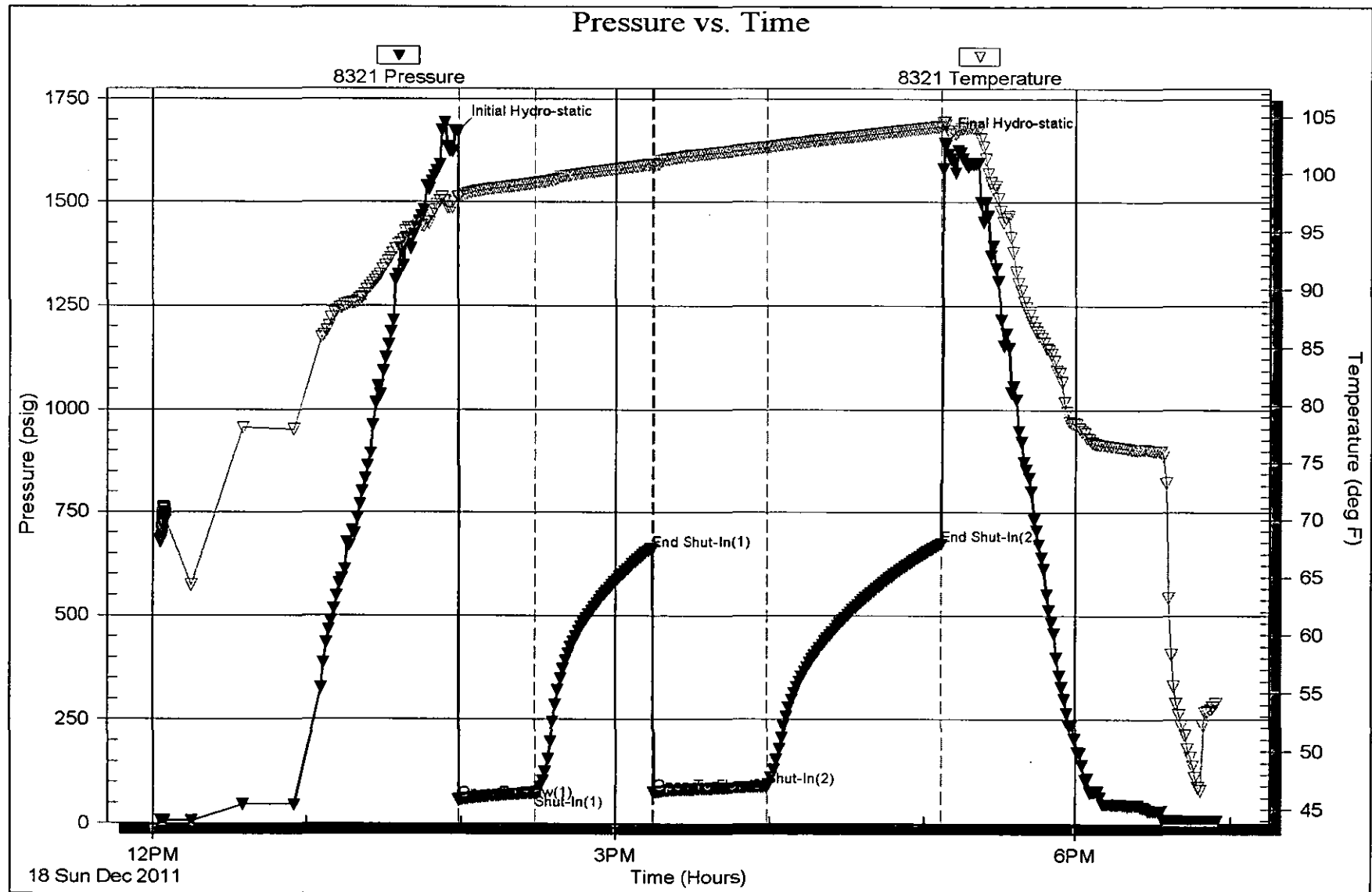
Length ft	Description	Volume bbl
43.00	OOGM 10%G20%O70%M	0.603
20.00	HOCM 45%O55%M	0.281
10.00	Gassy Oil 35%G65%O	0.140
0.00	157-GIP	0.000

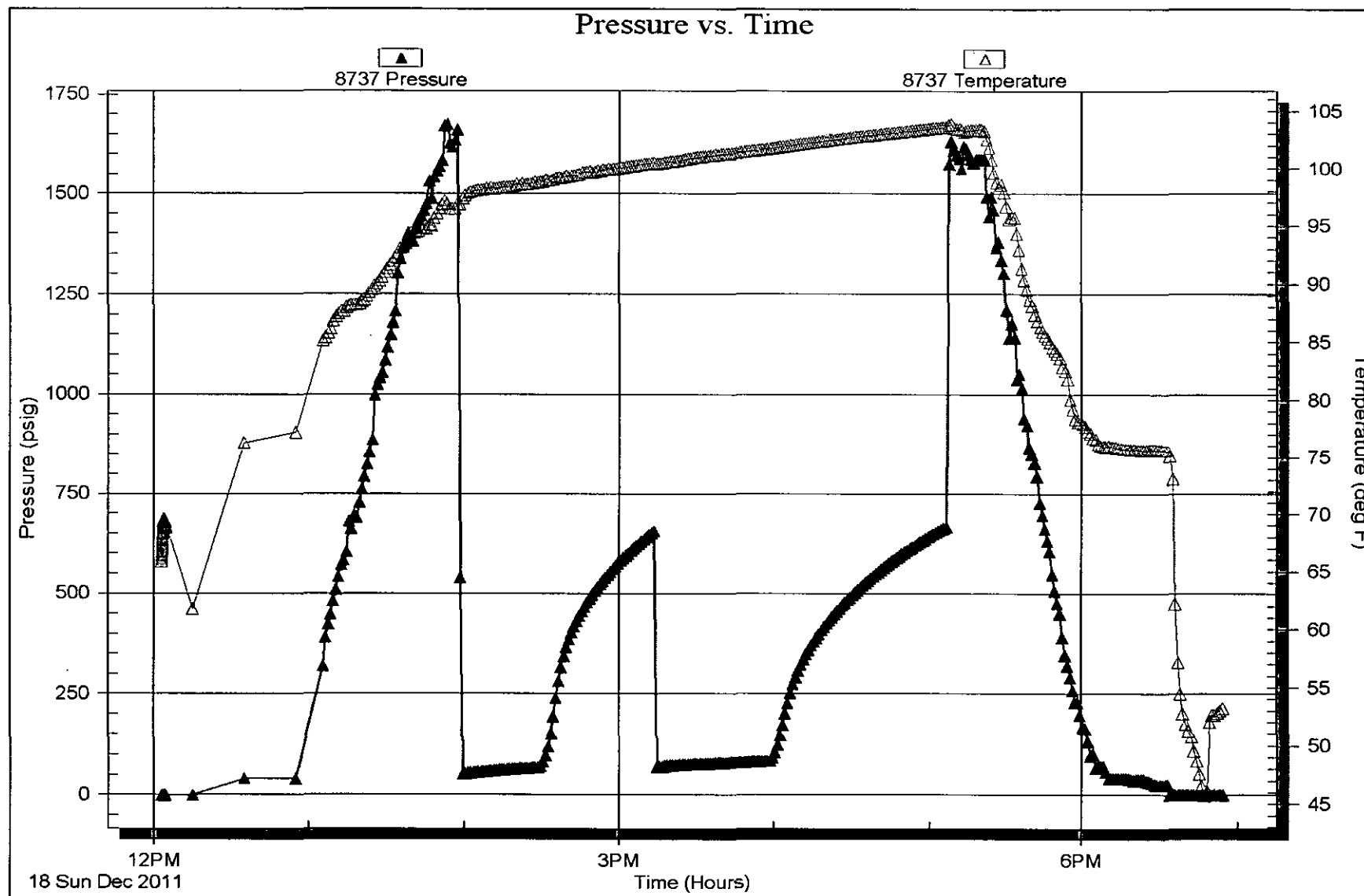
Total Length: 73.00 ft Total Volume: 1.024 bbl

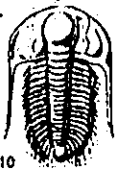
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments:







TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

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Test Ticket

NO. 46241

BY: _____

Well Name & No. Kathy #2-24 Test No. 1 Date 12-18-11
 Company American Warrior INC Elevation 1747 KB 1739 GL
 Address PO Box 399 GARDEN CITY KS 67840
 Co. Rep / Geo. Josh Austin Rig Duke #8
 Location: Sec. 24 Twp. R9S Rge. 10 W Co. Rice State KS

Interval Tested 3205-3284 Zone Tested Amblechle
 Anchor Length 79 Drill Pipe Run 3200 Mud Wt. 9.5
 Top Packer Depth 3200 Drill Collars Run 0 Vis 53
 Bottom Packer Depth 3205 Wt. Pipe Run 0 WL 9.6
 Total Depth 3284 Chlorides 7100 ppm System LCM 0

Blow Description IP - Fair Blow Built to 9 1/2 IN
BT - Dead to break surface Blow Back
FP - Fair Blow Built to 9 1/2 IN
FST - Weak surface Blow Back

Rec	Feet of	%gas	%oil	%water	%mud
<u>43</u>	<u>OCCOM</u>	<u>10</u>	<u>20</u>	<u>70</u>	
<u>20</u>	<u>HOC.M</u>		<u>45</u>	<u>55</u>	
<u>10</u>	<u>CASSY oil</u>	<u>35</u>	<u>65</u>		
	<u>157-GIP</u>				
Rec Total	<u>73</u>	BHT <u>104</u>	Gravity <u>43</u>	API RW @	F. Chlorides ppm

- (A) Initial Hydrostatic 11671
- (B) First Initial Flow 57
- (C) First Final Flow 74
- (D) Initial Shut-In 4040
- (E) Second Initial Flow 710
- (F) Second Final Flow 90
- (G) Final Shut-In 4072
- (H) Final Hydrostatic 14044

- Test 1125
- Jars
- Safety Joint
- Circ Sub
- Hourly Standby
- Mileage 142RT 19880
- Sampler
- Straddle
- Shale Packer
- Extra Packer
- Extra Recorder
- Day Standby
- Accessibility
- Sub Total 1323.80

T-On Location 11:23
 T-Started 12:02
 T-Open 13:58
 T-Pulled 16:58
 T-Out 18:54

Comments: _____
 Ruined Shale Packer
 Ruined Packer
 Extra Copies
 Sub Total 0
 Total 1323.80
 MP/DST Disc't _____

Initial Open 30
 Initial Shut-In 45
 Final Flow 45
 Final Shut-In 40

Approved By: _____ Our Representative Jeff Brown

Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

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 KCC WICHITA