

KCC OIL/GAS REGULATORY OFFICES

Date: 3-4-14

District: 1

Case #: \_\_\_\_\_

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 4058  
 Op Name: American Warrior  
 Address 1: P.O. Box 399  
 Address 2: \_\_\_\_\_  
 City: Garden City  
 State: Kansas Zip Code: 67846  
 Operator Phone #: 620 275-2963

API Well Number: 15-171-2102B-00-00  
 Spot: SW NENE Sec 2 Twp 18 S Rng 34  E  W  
970 Feet from  N  S Line of Section  
1296 Feet from  E  W Line of Section  
 GPS: Lat: \_\_\_\_\_ Long: \_\_\_\_\_ Date: \_\_\_\_\_  
 Lease Name: Palkowitsh Well #: 1-2  
 County: Scott

Reason for Investigation:

Alternate II Cementing

Problem:

\_\_\_\_\_

Persons Contacted:

None

Findings:

8 7/8 % 309' w/ 185sx ; 5 1/2 % 4978' w/ 145sx , TD % 5000'.  
Port Collar % 2440'.  
Swift SUCS pumped 210 sx SMD thru port collar.  
Circulated 15 sx to the pit.

Action/Recommendations:

Follow Up Required  Yes  No

Date: \_\_\_\_\_

Alternate II Cementing Complete

**KCC WICHITA**  
**MAR 14 2014**  
**RECEIVED**

Verification Sources:

- RBDMS
- T-I Database
- Other: \_\_\_\_\_
- KGS
- District Files
- TA Program
- Courthouse

Photos Taken: 0

By: Ken Schlik

Retain 1 Copy District Office  
Send 1 Copy to Conservation Division

**RECEIVED**  
**MAR 12 2014**

**KCC DODGE CITY**

Form: \_\_\_\_\_

*PORT*

Date: \_\_\_\_\_

District: \_\_\_\_\_

License #: \_\_\_\_\_

Op Name: \_\_\_\_\_

Spot: \_\_\_\_\_ Sec \_\_\_\_\_ Twp \_\_\_\_\_ S Rng \_\_\_\_\_  E  W

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

I.D. Sign  Yes  No

Tank Battery Condition  
Condition:  Good  Questionable  Overflowing

Pits, Injection Site  
Fluid Depth: \_\_\_\_\_ ft; Approx. Size: \_\_\_\_\_ ft. x \_\_\_\_\_ ft.

Oil Spill Evidence

Abandoned Well Potential Pollution Problem  Yes  No

Lease Cleanliness

Very Good  Satisfactory  Poor  Very Bad

Gas Venting  Yes  No

Pits  
Fluid Depth: \_\_\_\_\_ ft; Approx. Size: \_\_\_\_\_ ft. x \_\_\_\_\_ ft.

Saltwater Pipelines    
Leaks Visible:  Y  N Tested for Leaks:  Y  N

Flowing Holes

TA Wells

Monitoring Records

SWD/ER Injection Well  Yes  No

Permit #: \_\_\_\_\_ Pressure - Actual: \_\_\_\_\_ psi; Authorized: \_\_\_\_\_ psi

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Permit #: \_\_\_\_\_ Pressure - Actual: \_\_\_\_\_ psi; Authorized: \_\_\_\_\_ psi

Gauge Connections  Yes  No

Tubing: \_\_\_\_\_; T/C Annulus: \_\_\_\_\_; C/SP Annulus: \_\_\_\_\_

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API Number	Footages	Spot Location	GPS	Well #	Well Status

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Form: \_\_\_\_\_