

RECEIVED

MAY 14 2002

05-14-2002

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

KCC WICHITA

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

Operator: License # 4058

Name: American Warrior inc

Address: P.O. Box 399,

City/State/Zip: Garden City, Ks 67846

Purchaser: None D/A

Operator Contact Person: Kevin Wiles Sr

Phone: (620) 275-2963

Contractor: Name: Duke Drilg/

License: 5929

Wellsite Geologist: Alan 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. _____

11-15-00 11-25-00 11-25-00

Spud Date or 11-15-00 Date Reached TD 11-25-00 Completion Date or 11-25-00 Recompletion Date

API No. 15 - 033-21,165-0000

County: Comanche

2' N & 170' W of Sec. 33 Twp. 32 S. R. 18 W East West

NE-NE-SE feet from (S) / N (circle one) Line of Section

2312' feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW

Lease Name: Bremer Well #: 33-2

Field Name: Wild Cat

Producing Formation: None

Elevation: Ground: 2041 Kelly Bushing: 2054

Total Depth: 5346 Plug Back Total Depth: NA

Amount of Surface Pipe Set and Cemented at 661' 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 ALT 1 D/A
(Data must be collected from the Reserve Pit) 1-24-03 DPW

Chloride content 14,000 ppm Fluid volume 320 bbls

Dewatering method used Hauled Offsite

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

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: 5-10-2002

Subscribed and sworn to before me this 10th day of May 2002

Notary Public: _____

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: 5-17-02 DPW

Wireline Log Received

Geologist Report Received

UIC Distribution

15-033-21165-00-00

ORIGINAL

Side Two.

Operator Name: American Warrior inc Lease Name: Bremer Well #: 33-2
 Sec. 33 Twp. 32s S. R. 18wb East West County: Comanche

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 (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input 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	4293' ^{Top}	-2239' ^{Datum}
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	4480'	-2426
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	4700'	-2646
List All E. Logs Run:		Drum	4966'	-2912
CDNL/GR Sonic, Micro, Dual IND		BKC	4973'	-2919
		Marmaton	5064'	-3010
		Pawnee	5102'	-3048
		Fort Scott	5118'	-3064
		Cherokee	5167'	-3113
		Miss		

RECEIVED
MAY 14 2004
KCC WICHITA

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	# Sacs Used	Type and Percent Additives
Surface	12 1/4"	8-5/8"	23#	661'	Stand	425	3%cc@2%gel
Cond.		20"		42'			

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
	None D/A		

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	None	D/A			
Date of First, Resumed Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	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 _____

15-033-21165-00-00
ALLIED CEMENTING CO., INC. 4066

Federal Tax I.D.# 4

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

ORIGINAL

SERVICE POINT: _____

DATE	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
11-18-00	33	25	18	10:00 AM	11:30 AM	9:30 AM	5:30 PM
LEASE		WELL #		LOCATION		COUNTY	STATE
		20-2		Adair Co. Dist. 35		Adair	MO
OLD OR NEW (Circle one)							
				NE 3/4 S E3			

CONTRACTOR Walter #7
 TYPE OF JOB Well
 HOLE SIZE 4 1/2 T.D. 665
 CASING SIZE 4 1/2 DEPTH 661
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 400 MINIMUM 100
 MEAS. LINE _____ SHOE JOINT 40.82
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 37 BBLs Fresh H₂O

OWNER Warrior Oil Co.
CEMENT
 AMOUNT ORDERED 25 yds 1503500
1 C + 4" Flt - 500 - 200 ex 1500
1 3% cc + 2% cc
Top off 5x A + 3% cc
 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____

EQUIPMENT

PUMP TRUCK CEMENTER Justin Hart
 # _____ HELPER Mark Brummett
 BULK TRUCK _____
 # _____ DRIVER David Echo
 BULK TRUCK _____
 # _____ DRIVER _____

RECEIVED

MAY 14 2002

KCC WICHITA

SERVICE

TOTAL _____

REMARKS:

10:00 AM Break Circ
11:00 AM 1503500 @ 15.5
4" Flt ex 1500 A 3/8 @ 15.2
1 3% cc + 2% cc
37 BBLs did not circ
1 3% cc + 2% cc
5 1/2" 1500 Full back Top off with
1 3% cc + 2% cc
plug down @ 10:30 AM

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 PLUG Rubber _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

CHARGE TO: American Warrior
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

8 1/2
 1- Baffle Plate @ _____
 1- Gasket @ _____
 1- Centralizer @ _____
 _____ @ _____
 _____ @ _____

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 _____

ALLIED CEMENTING CO., INC. 4524

Federal Tax I.D.

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

15-033-21165-00-00

ORIGINAL

SERVICE POINT:

Medicine Lodge

DATE <i>1/25/00</i>	SEC. <i>33</i>	TWP. <i>32s</i>	RANGE <i>18w</i>	CALLED OUT <i>10:00 AM</i>	ON LOCATION <i>4:00 PM</i>	JOB START <i>4:15 PM</i>	JOB FINISH <i>6:40</i>
LEASE <i>Bunker</i>		WELL # <i>33-2</i>		LOCATION <i>Coldwater Airport</i>		COUNTY <i>Comanche</i>	STATE <i>Ks</i>
OLD OR NEW (Circle one)			<i>2E, 1S, E/10to</i>				

CONTRACTOR *Duke #7* OWNER *American Warrior*

TYPE OF JOB *Rotary Plug*
 HOLE SIZE *7 7/8* T.D. *5350'*
 CASING SIZE *8 1/2* DEPTH *163'*
 TUBING SIZE DEPTH
 DRILL PIPE *4 1/2 x 11.60* DEPTH *940'*
 TOOL DEPTH
 PRES. MAX *2.50* MINIMUM *-*
 MEAS. LINE SHOE JOINT

CEMENT AMOUNT ORDERED
125 SK 60:40:6

CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT *fresh + mud*

COMMON @
 POZMIX @
 GEL @
 CHLORIDE @
 @
 @
 @
 @
 @
 @
 HANDLING @
 MILEAGE

EQUIPMENT

PUMP TRUCK CEMENTER *221B*
 # *32* HELPER *Stacy W.*
 BULK TRUCK
 # *289* DRIVER *Dave F.*
 BULK TRUCK
 # DRIVER

RECEIVED
 MAY 14 2002
 KCC WICHITA SERVICE

REMARKS:

plug 40 sk - 940'
50 sk - 890'
10 sk - 40'
10 sk - Discuse Hole
15 sk - RAT Hole

DEPTH OF JOB *940'*
 PUMP TRUCK CHARGE
 EXTRA FOOTAGE @
 MILEAGE @
 PLUG *wooden* @
 @
 @

CHARGE TO: *American Warrior*
 STREET
 CITY STATE ZIP

FLOAT EQUIPMENT

@
 @
 @
 @
 @

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.

TOTAL
 TAX
 TOTAL CHARGE
 DISCOUNT IF PAID IN 30 DAYS

SIGNATURE *[Signature]*

STUART STUART
 PRINTED NAME