

For KCC Use:
 Effective Date: 6-10-02
 District # 1
 SGA? Yes No

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION
NOTICE OF INTENT TO DRILL

Form C-1
 September 1999
 Form must be Typed
 Form must be Signed
 All blanks must be Filled

Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date June 7, 2002
month day year

OPERATOR: License# 4058
 Name: AMERICAN WARRIOR, INC.
 Address: P. O. Box 399
 City/State/Zip: Garden City, Kansas 67846-0399
 Contact Person: Cecil O'Brate
 Phone: 620/275-9231

CONTRACTOR: License# 5929
 Name: DUKE DRILLING CO., INC.

Well Drilled For: Oil Enh Rec Gas Storage OWWO Disposal Seismic; # of Holes Other

Well Class: Infield Pool Ext. Wildcat Other

Type Equipment: Mud Rotary Air Rotary Cable

If OWWO: old well information as follows:
 Operator: _____
 Well Name: _____
 Original Completion Date: _____ Original Total Depth: _____

Directional, Deviated or Horizontal wellbore? Yes No
 If Yes, true vertical depth: RECEIVED
 Bottom Hole Location: KANSAS CORPORATION COMMISSION
 KCC DKT #: _____

JUN 04 2002
 6-4-02

AFFIDAVIT

The undersigned hereby affirms that the wellbore completion and eventual plugging of this well will comply with K.S.A. 55-101, et. seq.
 It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be posted on each drilling rig**;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: June 4, 2002 Signature of Operator or Agent: Sally R. Byers Title: Agent

For KCC Use ONLY
 API # 15 - 033-21320-00-00
 Conductor pipe required NONE feet
 Minimum surface pipe required 200 feet per Alt. ①
 Approved by: RJP 6-5-2002
 This authorization expires: 12-5-2002
 (This authorization void if drilling not started within 6 months of effective date.)
 Spud date: _____ Agent: _____

Spot 50'S & 100'W of East West
 C-E/2 SE - NE Sec. 7 Twp. 35 S. R. 15
2030 feet from N (circle one) Line of Section
430 feet from E (circle one) Line of Section
 Is SECTION Regular Irregular?

(Note: Locate well on the Section Plat on reverse side)
 County: Comanche
 Lease Name: BEELEY Well #: 1-7
 Field Name: YELLOWSTONE NORTH
 Is this a Prorated / Spaced Field? Yes No
 Target Information(s): Arbuckle
 Nearest Lease or unit boundary: 430'
 Ground Surface Elevation: _____ feet MSL
 Water well within one-quarter mile: Yes No
 Public water supply well within one mile: Yes No
 Depth to bottom of fresh water: 120'
 Depth to bottom of usable water: 180'
 Surface Pipe by Alternate: 1 2
 Length of Surface Pipe Planned to be set: 600'+
 Length of Conductor Pipe required: N/A
 Projected Total Depth: 6400'
 Producing Formation Target: Arbuckle
 Water Source for Drilling Operations:
 Well _____ Farm Pond _____ Other
 DWR Permit #: _____
 (Note: Apply for Permit with DWR)
 Will Cores be taken? Yes No
 If Yes, proposed zone: _____

7
 35
 1602

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15 - _____
 Operator: _____
 Lease: _____
 Well Number: _____
 Field: _____
 Number of Acres attributable to well: _____
 QTR / QTR / QTR of acreage: _____ - _____ - _____

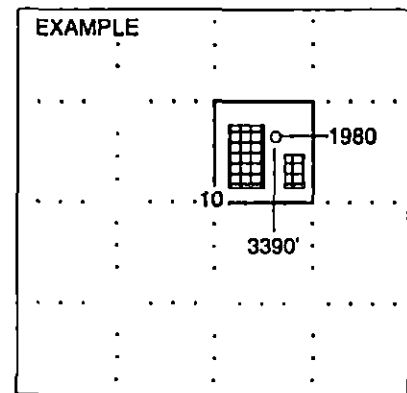
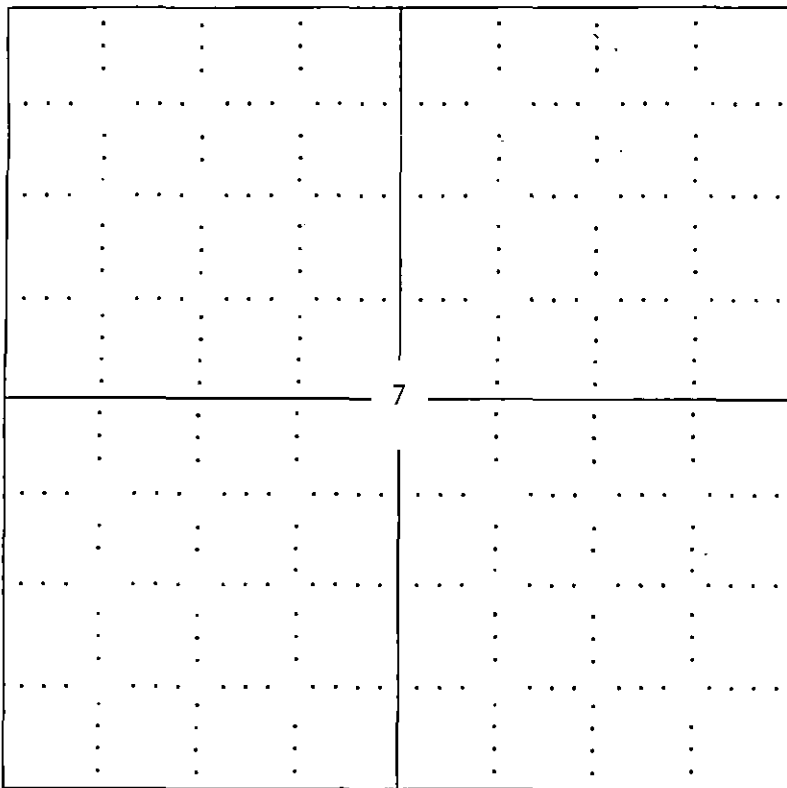
Location of Well: County: _____
 _____ feet from S / N (circle one) Line of Section
 _____ feet from E / W (circle one) Line of Section
 Sec. _____ Twp. _____ S. R. _____ East West

Is Section _____ Regular or _____ Irregular

If Section Is Irregular, locate well from nearest corner boundary.
 Section corner used: ___NE ___NW ___SE ___SW

PLAT

*(Show location of the well and shade attributable acreage for prorated or spaced wells.)
 (Show footage to the nearest lease or unit boundary line.)*



NOTE: In all cases locate the spot of the proposed drilling location.

COMANCHE COUNTY

In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the section's south / north and east / west.
3. The distance to the nearest lease or unit boundary line.
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).