

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 175215800001

ORIGINAL

County Seward

C NE SW Sec. 9 Twp. 33 Rge. 31 X E W

Operator: License # 4058

Name: American Warrior, Inc.

Address P.O. Box 399

City/State/Zip Garden City, KS 67846

Purchaser: Panhandle Eastern

Operator Contact Person: Kevin Wiles

Phone (316) 275-2963

Contractor: Name: Cheyenne Drilling

License: 5382

Wellsite Geologist: Kevin Wiles Sr.

Designate Type of Completion
 New Well X Re-Entry Workover

 Oil SWD S10W Temp. Abd.
X Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: Harris Oil & Gas

Well Name: Meyers-Wilbanks 1-9

Comp. Date 3-10-97 Old Total Depth 6050

 Deepening X Re-perf. Conv. to Inj/SWD
X Plug Back PBTD
 Commingled Docket No.
 Dual Completion Docket No.
 Other (SWD or Inj?) Docket No.

7-10-97 7-13-97 8-5-97
Spud Date Date Reached TD Completion Date

1980 Feet from S (circle one) Line of Section

1980 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or S (circle one)

Lease Name Meyers Well # 2

Field Name Wildcat

Producing Formation Toronto

Elevation: Ground 2769 KB 2783

Total Depth 4500 PBTD 4472

Amount of Surface Pipe Set and Cemented at 1590 Feet

Multiple Cements Cementing Collar Used? Yes No

If yes, show depth set Feet

If Alternate II Completion, cement circulated from

feet depth to w/ sx cmt.

CONSERVATION DIVISION
Drilling Fluid Management Plan ALT 1 DPW
(Data must be collected from the Reserve Pit) 12-13-87

Chloride content 4600 ppm Fluid volume 300 bbls

Dewatering method used

Location of fluid disposal if hauled offsite:

Operator Name

Lease Name License No.

 Quarter Sec. Twp. S Rng. E/W

County Docket No.

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 on 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 Kevin Wiles
Title Production Manager Date 10-10-97

Subscribed and sworn to before me this 10th day of October, 1997.

Notary Public Debra Purcell

Date Commission Expires 10/14/99
NOTARY PUBLIC
State of Kansas
MY APPT. EXPIRES 11/1/99

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C X Wireline Log Received
C Geologist Report Received
Distribution
X KCC SWD/Rep NGPA
KGS Plug Other
(Specify)

Operator Name American Warrior, Inc. Lease Name Meyers Well # 2

Sec. 9 Twp. 33 Rge. 31 East West
 County Seward

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Toronto	4279	-1497
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E.Logs Run: Cement Bond Log				

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	# Sacks Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	24#	159	Halliburton	UNKNOWN	
Production	7-7/8"	4-1/2"	9.5#	4490	Halliburton	355	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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
3	4291'-4293'		2500 gallons 15% fe acid	4291
3	4296'-4301'			
3	4308'-4312'			

TUBING RECORD	Size 2-3/8"	Set At 4450'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. SHUT IN		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	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio
		SHUT IN	SHUT IN	

Disposition of Gas: <u>SHUT IN</u>	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	4291
	<input type="checkbox"/> Other (Specify) _____	4312