

ORIGINAL

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
ACO-2 AMENDMENT TO WELL HISTORY

Operator: License # 4058
Name: American Warrior, Inc.
Address: P. O. Box 399
City/State/Zip: Garden City, KS
Purchaser: IBP
Operator Contact Person: Michael J. Wreath
Phone: (316) 275-2963

Designate Type of Original Completion
 New Well Re-Entry Workover
Date of Original Completion 4-12-1982
Name of Original Operator Continental Energy
Original Well Name Deines No. 1

Date of Recompletion: 8-15-90 8-21-1990
Commenced Completed
Re-entry Workover

Designate Type of Recompletion/Workover:
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.).
 Deepening Re-perforation
 Plug Back 2690 PBD
 Conversion to Injection/Disposal

Is recompleted production:
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (Disposal or Injection?) Docket No. _____

API NO. 15- 055-20,503-0001

County Finney

C E/2 NE/4 Sec. 20 Twp. 24S Rge. 32 East West

3960 Ft. North from Southeast Corner of Section

330 Ft. West from Southeast Corner of Section

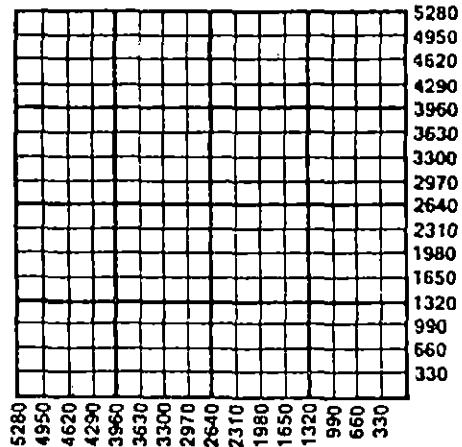
(NOTE: Locate well in section plat below.)

Lease Name Deines Well # 1

Field Name Hugoton

Producing Formation Chase Group

Elevation: Ground 2826 KB 2835



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

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

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 Michael J. Wreath Title Geologist Date Jan. 3, 1991

Subscribed and sworn to before me this 3rd. day of January 19 91

Notary Public Patricia S. Merz Date Commission Expires 2/14/93

PATRICIA S. MERZ
NOTARY PUBLIC

STATE OF KANSAS
My Comm. Exp. 2/14/93

Wichita, Kansas

1-7-91

FORM ACO-2
7/89

SIDE TWO

Operator Name American Warrior, Inc. Lease Name Deines Well # 1

Sec. 20 Twp. 24 Rge. 32 East West

County Finney

RECOMPLETION FORMATION DESCRIPTION

Log Sample

Name _____ Top _____ Bottom _____

ADDITIONAL CEMENTING/SQUEEZE RECORD					None
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
3	2620 - 2630	2000 gals. 15% FE acid in each zone
3	2558 - 2570	Frac all with 80,000 lbs. 12-20 sand
3	2500 - 2520	Nitrogen Foam

PBTD 2690 Plug Type CIBP

TUBING RECORD

Size 2 3/8" Set At 2682 Packer At None Was Liner Run Y X N

Date of Resumed Production, Disposal or Injection September 1, 1990

Estimated Production Per 24 Hours Oil 0 Bbls. Water 60 Bbls. NA Gas-Oil-Ratio
Gas 225 Mcf

Disposition of Gas:

Vented Sold Used on Lease (If vented, submit ACO-18.)