

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

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 4058
Name: American Warrior Inc.
Address: P.O. Box 399
City/State/Zip: Garden City Ks. 67846
Purchaser: Duke
Operator Contact Person: Jody Smith
Phone: (620) 272-1023
Contractor: Name: Cheyenne Drilling Inc.
License: 5382

RECEIVED

OCT 28 2003

Wellsite Geologist: NA **KCC WICHITA**

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

<u>5/21/03</u>	<u>5/23/03</u>	<u>9/19/03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 075-20-8050000
County: Hamilton
C SW Sec. 32 Twp. 21 S. R. 40 East West
1250' feet from S N (circle one) Line of Section
1250' feet from E N (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Gould Well #: 2-32

Field Name: Bradshaw
Producing Formation: Chase

Elevation: Ground: 3580 Kelly Bushing: 3585
Total Depth: 2950 Plug Back Total Depth: 2946

Amount of Surface Pipe Set and Cemented at 330 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 cml.

Drilling Fluid Management Plan 11-14-03
(Data must be collected from the Reserve Pit) All II completed per district
Chloride content 12000 ppm Fluid volume 280 bbls

Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____

Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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: [Signature]
Title: Well Service Foreman Date: 10/27/03
Subscribed and sworn to before me this 27th day of October, 2003
Notary Public: [Signature]
Date Commission Expires: 11/4/03

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

DEBRA J. PURCELL
Notary Public, State of Kansas
My Appt. Expires 11/4/03

X

ORIGINAL

Operator Name: American Warrior Inc. Lease Name: Gould Well #: 2-32
 Sec. 32 Twp. 21 S. R. 40 East West County: Hamilton

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets)	<input 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 Top Datum
Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Herrinton 2758'
Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy)	upper Krider 2800'
List All E. Logs Run:	Lower Krider 2812'

CASING RECORD <input 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	330	Com.	190	3%cc,2%gel
Production	7-7/8	4-1/2	10.5	2942	SMD	470	1/4% Floc.

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
4	2758 to 2763	1500 gal 20%FE, 17000 gal Hyd 30	
4	2800 to 2806		
4	2812 to 2818		

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8	2840	NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
NA			<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	Gravity
	NA	NA	NA		

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____

ALLIED CEMENTING CO., INC. 11225

Federal Tax I.D.# 48-0727860

ORIGINAL

SERVICE POINT:

Oakley

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

DATE <u>5-21-03</u>	SEC <u>32</u>	TWP <u>21s</u>	RANGE <u>40w</u>	CALLED OUT	ON LOCATION <u>5:00 PM</u>	JOB START <u>7:00 PM</u>	JOB FINISH <u>7:30 PM</u>
LEASE <u>Gould</u>	WELL # <u>2-23</u>		LOCATION <u>Syracuse 13 N 1 E 1/2 NE</u>		COUNTY <u>HAMILTON</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Choyanne Dily Rig 5

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 328

CASING SIZE 8 3/8 DEPTH 330'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 40'

PERFS.

DISPLACEMENT 18 1/2 Bbls

EQUIPMENT

PUMP TRUCK CEMENTER Dean

191 HELPER Andrew

BULK TRUCK DRIVER Jarrod

218

BULK TRUCK DRIVER

OWNER Same

CEMENT AMOUNT ORDERED 190 sks Com 3 1/2 CC 2 1/2 Gal

COMMON @

POZMIX @

GEL @

CHLORIDE @

HANDLING @

MILEAGE @

REMARKS:

Cement did circulate ✓

RECEIVED

OCT 28 2003

KCC WICHITA SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

PLUG @

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.

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME



15-075.20805.0000

CHARGE TO: American Water
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET No 5591

PAGE 1 OF

SERVICE LOCATIONS 1. <u>Dilling, R</u>	WELL/PROJECT NO. <u>2-23</u>	LEASE <u>Goold</u>	COUNTY/PARISH <u>Hamilton</u>	STATE <u>Ky</u>	CITY	DATE <u>5-23-03</u>	OWNER <u>Sarc</u>
2. <u>0</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>Chayne Dtk '8</u>	RIG NAME/NO.	SHIPPED VIA <u>ITT</u>	DELIVERED TO <u>Lorton</u>	ORDER NO.	
3.	WELL TYPE <u>Gas</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Cur. 4 1/2" Prod. Rig.</u>	WELL PERMIT NO.	WELL LOCATION <u>Sec 32-21-40W</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
575		1			MILEAGE #103	120	mi			2.50	300	81
578		1			Pump Service	1	ea			1,200	1,200	81
407		1			Insert Heat Snc	1	ea	4 1/2	in	200	200	81
406		1			Inst. Down Plug + Baffle	1	ea	"		190	190	81
402		1			Centralizer	10	ea			34	340	81
403		1			Cur. Ber Pch	3	ea			115	345	81
281		1			Mud Flush	500	gal			60	300	81
271		1			KCL	2	gal			19	38	81
581		1			Service Charge	470	sh			1	470	81
583		1			Drainage	2308	min			101	2386	81
330		1			SMOC	470	sh			9	4582	81
276		1			Florde	117	"			90	105	81

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X Phil Ford
 DATE SIGNED: TIME SIGNED: A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY		AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	10457	60
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?							
WE UNDERSTOOD AND MET YOUR NEEDS?							
OUR SERVICE WAS PERFORMED WITHOUT DELAY?							
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					TAX		
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO					TOTAL		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND							

JOB LOG

SWIFT Services, Inc.

ORIGINAL

DATE 5-27-03 PAGE NO. 7

CUSTOMER American Water Well WELL NO. 2-23 LEASE Gould JOB TYPE Long String TICKET NO. 5591

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1430							On loc.
	1445							Start in hole with 4 1/2" Csg. Insert float shoe Latch down Baffle
								Con. on "1, "3, "5, "7, "11, "15, "19, "25, "44 Ratchet on "5, "24, "43
	1615							Drop Ball
	1620							Circulate
	1640		12					50 gal Mud Flush
			20					20" KCL Flush
								MIX 350 lb SMD 1/4" Head @ 11.2 gal mix 120 lbs 13.5 gal
	1730							Finished mixing Wash out pump + line Displace latch down plug
	1730		46					Plug down 1500 psi holding Release press. Drilled up wash and rack up travel
	1815							Job complete Did Not Circulate Complet ✓

[Handwritten signature]