

API NUMBER 15-185-20560-0000

LEASE NAME Mellies A

WELL NUMBER 2

4290 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 31 TWP. 21 RGE. 11 (E) or (W)

COUNTY Stafford

Date Well Completed _____

Plugging Commenced 08-21-97

Plugging Completed 08-21-97

TYPE OR PRINT
 NOTICE: Fill out completely
 and return to Cons. Div.
 office within 30 days.

LEASE OPERATOR American Warrior, Inc.

ADDRESS P. O. Box 399, Garden City, Kansas 67846

PHONE# (316) 275-2963 OPERATORS LICENSE NO. 4058

Character of Well Oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 08-21-97 (date)

by Richard Lacey, District 1 office (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, Is well log attached? _____

Producing Formation _____ Depth to Top 3360' Bottom 3364' T.D. 3600

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
	Surface		255	8 5/8"	255	0
	Production		3598	4 1/2"	3598	802

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, - from _____ feet to _____ feet each set
Bottom plug sand and cement to 3310'. Halliburton hooked to well, mixed 400# hulls and mixed and pumped 225 sacks cement. Max psi 800#, shut in 400#. Time started 5:30 pm, completed 6:10 pm

8-26-1997

Name of Plugging Contractor D. S. & W. Well Servicing, Inc. License No. 6901

Address P. O. Box 231, Claflin, Kansas 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Warrior, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

Joseph Strube (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed; that the same are true and correct, so help me God.

(Signature) Joseph Strube
 (Address) P. O. Box 231, Claflin, Kansas 67525

SUBSCRIBED AND SWORN TO before me this 22nd day of August, 1997

Bonnie L. Currell
 Notary Public

My Commission Expires: April 8, 2001

USE ONLY ONE SIDE OF EACH FORM

