

STATE OF KANSAS  
STATE CORPORATION  
COMMISSION  
130 South Market Room 2078  
Wichita, Kansas 67202

RECEIVED

MAY 24 2004

KCC WICHITA

WELL PLUGGING RECORD  
K.A.R. 82-3-117

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Cons. Div.  
office within 60 days.

API NUMBER 15-033-21,057 -00-00

LEASE NAME O. Blount

WELL NUMBER 1

2310 Ft. from (N) S Section Line

2310 Ft. from E / (W) Section Line

LEASE OPERATOR American Warrior, Inc.

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

PHONE # 620-275-2963 OPERATOR'S LICENSE NO. 4058

Character of Well Good

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

The plugging proposal was approved on 3/29/2004 4-8-04 (date)

by Scott Alberg (KCC District Agent's Name).

is ACO-1 filed? Yes If not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top 5278 Bottom 5304 T. D. 5972 6040

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
<u>Surf</u>				8 5/8	632	None
<u>Prod</u>				4 1/2	6040	4000

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from \_\_\_ feet to \_\_\_ feet each set.

Lay down rods and tubing, set CIBP at 5203', dump 2 sacks portland cement with dump bailer, stretch and cut 4 1/2 at 4000'

Lay down 4 1/2

4/1/2004 - run 1100' of 2 3/8 tubing, Allied spot 15 gel, 50 cement at 640', 50 cement at 300', 40 cement at 40', 10 cement, 60/40, 6% gel,

4/8/2004 - topped 1 1/2 yard 2500 lb concrete

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Clarke Corporation License No. 5105

Address P.O. Box 187, 107 W. Fowler, Medicine Lodge, KS 67104

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

STATE OF Kansas COUNTY of Barber, ss.

John Swinford (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 filled that the same are true and correct, so help me God.

(Signature) John Swinford

(Address) P.O. Box 187, Medicine Lodge, KS 67104

SUBSCRIBED AND SWORN TO before me this 21 day of May 2004



Glenda Morrison  
Notary Public

My Commission Expires: November 30, 2006

*[Handwritten mark]*