KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: American Warrior, Inc.
License Number: 4058
Operator Address: PO BOX 399 GARDEN CITY KS 67846 0399
Contact Person: Jose Reyes
Phone Number: (620) 275 - 2963
Permit Number *(API No. if applicable)*: 15-055-22587-00-00
Lease Name: HOLSTED TWIN
Well Number: 1-24

Source of Waste:

- [ ] Emergency Pit
- [ ] Settling Pit
- [ ] Workover Pit
- [ ] Drilling Pit
- [ ] Burn Pit
- [ ] Haul-off Pit
- [x] Steel Pit
- [ ] Spill / Escape
- [ ] Dike

Source Location (QQQQ): SE - NE - SW - SE
Sec. 24 Twp. 22 R. 33 [ ] East [x] West
838 Feet from [ ] North / [x] South Line of Section
1626 Feet from [x] East / [ ] West Line of Section
GPS Location: Lat: _____ (e.g. xx.xxxxx), Long: _____ (e.g. -xxx.xxxxx)
Datum: [ ] NAD27 [ ] NAD83 [ ] WGS84
County: Finney

No Waste to be Hauled: [ ] *(If checked, provide an explanation as to why no waste was hauled in the Comments area.)*

Type of waste to be disposed: [x] Fluid [ ] Soil [ ] Mud / Cuttings [ ] Other: _____

Amount of waste: 2 No. of loads 150 Barrels _____ Tons _____ YDS

Destination of waste: [ ] Reserve Pit [ ] Haul Off Pit [x] Disposal Well [ ] Lease Road [ ] Dike / Berm [ ] Other: _____

If waste is transferred to another reserve pit, is the lease active? [ ] Yes [ ] No

Location of Waste Disposal:

Destination Out of State: [ ] *(If checked, provide the location of where the waste was hauled in the Comments area.)*

Date of Waste Transfer: 04/18/2023

Operator Name: American Warrior, Inc.
License No.: 4058
Lease Name: O'BRATE FINNEY 3-5 OWWO
Sec. 5 Twp. 23 R. 32 [ ] East [x] West
Docket No./API No.: 15-055-22370-00-02
County: Finney

Comments:

Submitted Electronically