RECEIVED KANSAS CORPORATION COMMISSION SAS CORPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION **CLOSURE OF SURFACE PIT**

OCT 17 2008

Form CDP-4 April 2004 Form must be Typed

CONSERVATION DIVISION

| | WICHITA, KS |
|--|---|
| Operator Name: American Warrior, Inc. | License Number: 8996 |
| Operator Address: P. O. Box 399, Garden City, Kansas 67846 | |
| Contact Person: Scott Corsair | Phone Number: (620) 275 - 2963 |
| Permit Number (API No. if applicable): 15-135-24,731 000c | Lease Name & Well No.: Moore-Stieben 1 |
| Type of Pit: | Pit Location (QQQQ): |
| Emergency Pit Burn Pit | S/2 N/2 S/2 S/2 |
| Settling Pit | Sec. 36 Twp. 18S R. 22 East W West |
| Workover Pit Haul-Off Pit | 770 Feet from North / South Line of Section |
| | 2647 Feet from East / West Line of Section |
| | NESS County |
| Date of closure: 9-17-08 | |
| | |
| Was an artificial liner used? Yes No | |
| If no, how were the sides and bottom sealed to prevent downward migration of the pit contents? Native Clay | |
| | |
| | |
| | |
| Abandonment procedure of pit: | |
| Let dry backfill and replaced top soil. | |
| | |
| | |
| The undersigned hereby certifies that he / she is Compliance Coordinator for American Warrior, Inc. | |
| The undersigned hereby certifies that he / she isCompliance Coordinatorfor American Warrior, Inc(Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his /her-knowledge and better. | |
| A service desired the desired in the mean of the desired in the de | |
| Signature of Applicant or Agent | |
| OTU OFFICE | |
| Subscribed and sworn to me on this 16TH day of SEPTEBMER , 2008 | |
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| My Commission Expire Alter Of My Appt. Exp. (A) Otary Public My Appt. (A) Otary Public My | |