

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>American Warrior, Inc.</b>		License Number: <b>4058</b>	
Operator Address: <b>P. O. Box 399, Garden City, Kansas 67846</b>			
Contact Person: <b>Kevin Wiles, Sr.</b>		Phone Number: ( <b>620</b> ) <b>275 - 2963</b>	
Permit Number (API No. if applicable): <b>015-185-23,651 0000</b>		Lease Name: <b>Abboud-Brown</b>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number: <b>1-18</b>	
		Source Location (QQQQ): <b>SW - NW - SE - SW</b> Sec. <b>18</b> Twp. <b>21S</b> R. <b>13</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>668</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>1623</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>STAFFORD</b> County	
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u>3</u> No. of loads <u>240</u> Barrels    _____ Tons    _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input checked="" type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: _____			
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <b>12-3-08</b>	
Operator Name: <b>John J. Darrah</b>		License No.: <b>5088</b>	
Lease Name: <b>Anshutz SWD</b>		Sec. <b>15</b> Twp. <b>21s</b> R. <b>14</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <b>D-17,893</b>		County: <b>Stafford</b>	
Comments:			
<p><b>RECEIVED</b> KANSAS CORPORATION COMMISSION <b>DEC 17 2008</b> CONSERVATION DIVISION WICHITA, KS</p>			
<p>The undersigned hereby certifies that he / she is <u>Nancy E Davis Compliance Coordinator</u>          for <u>American Warrior, Inc</u> (Co), a duly authorized agent, that all information shown hereon is true          and correct to the best of his / her knowledge and belief.</p> <p>Subscribed and sworn to before me on this <u>8<sup>th</sup></u> day of <u>November</u> <u>2008</u>  <u>Erica Kuhlmeier</u>          Notary Public</p> <p>My Commission Expires: <u>091209</u></p>			
<p><b>ERICA KUHLMEIER</b> Notary Public - State of Kansas My Appt. Expires <u>091209</u></p>			