

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>American Warrior, Inc.</u>		License Number: <u>4058</u>
Operator Address: <u>P. O. Box 399, Garden City, KS 67846</u>		
Contact Person: <u>Kevin Wiles, Sr.</u>		Phone Number: (<u>620</u>) <u>275</u> - <u>2963</u>
Permit Number (API No. if applicable): <u>015-191-22,548 0000</u>		Lease Name: <u>SCHNEIDER</u>
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: <u>1-26</u> Source Location (QQQQ): <u>NE - SW - SW - SW</u> Sec. <u>26</u> Twp. <u>34S</u> R. <u>2</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>335</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>335</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>SUMNER</u> County

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

Amount of waste: 4 No. of loads 320 Barrels _____ Tons _____ YDS

Destination of waste: Reserve Pit 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: _____ Date of Waste Transfer: 10-23-08

Operator Name: Messinger Pet. License No.: 4706

Lease Name: Nicholas SWD Sec. 20 Twp. 30s R. 8 East West

Docket No.: D-27,434 County: Kingman

RECEIVED
KANSAS CORPORATION COMMISSION

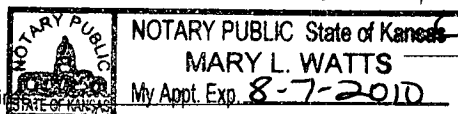
NOV 14 2008

CONSERVATION DIVISION
WICHITA, KS

The undersigned hereby certifies that he / she is Compliance Coordinator
for 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 belief.

Subscribed and sworn to before me on this 12TH day of NOVEMBER, 2008

 NOTARY PUBLIC State of Kansas
MARY L. WATTS
My Appt. Exp. 8-7-2010

[Signature]
Agent Signature

[Signature]
Notary Public