

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) 275 - 2963</u>	
Permit Number (API No. if applicable): <u>Q15-185-23,520 0000</u>		Lease Name: <u>PUNDSACK</u>	
Source of Waste:		Well Number: <u>1-19</u>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u>S2 - NW - SE - NE</u> Sec. <u>19</u> Twp. <u>21S</u> R. <u>13</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1700</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>990</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>STAFFORD</u> 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>4</u> No. of loads <u>320</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve 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 checked="" type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u>7-15-08</u>	
Operator Name: <u>AMERICAN WARRIOR, INC.</u>		License No.: <u>4058</u>	
Lease Name: <u>KOOPMAN 4 (HAZEL)</u>		Sec. <u>20</u> Twp. <u>21S</u> R. <u>13</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No.: <u>D-02,934</u>		County: <u>STAFFORD</u>	

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KANSAS CORPORATION COMMISSION

AUG 01 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 30TH day of JULY, 2008

My Commission Expires: 09/12/09

[Signature]
Agent Signature

[Signature]
Notary Public

ERICA KUHLMEIER
Notary Public, State of Kansas
My Appt. Expires 09/12/09