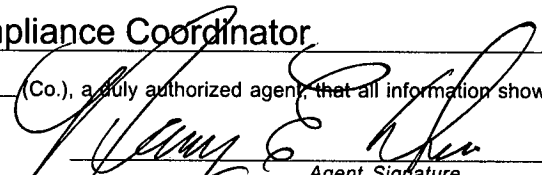
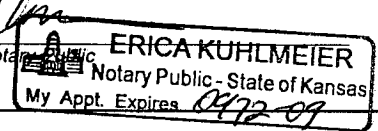


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5  
August 2004  
Form must be Typed

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>15-191-22,526 0000</u>		Lease Name: <u>Carter</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>1-15</u>	
		Source Location (QQQQ): <u>SW - SE - NE - SE</u> Sec. <u>15</u> Twp. <u>35S</u> R. <u>2</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1410</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>334</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>SUMNER</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>9-24-08</u>	
Operator Name: <u>Messinger Pet.</u>		License No.: <u>4706</u>	
Lease Name: <u>Nicholas SWD</u>		Sec. <u>20</u> Twp. <u>30s</u> R. <u>8</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No.: <u>D-27,434</u>		County: <u>Kingman</u>	
<p><b>RECEIVED</b> KANSAS CORPORATION COMMISSION</p> <p><b>OCT 08 2008</b></p> <p>CONSERVATION DIVISION WICHITA, KS</p>			
The undersigned hereby certifies that he / she is <u>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.			
		 Agent Signature	
Subscribed and sworn to before me on this <u>6TH</u> day of <u>OCTOBER</u> , <u>2008</u>			
My Commission Expires: <u>09-22-09</u>		 Notary Public - State of Kansas My Appt. Expires <u>09-22-09</u>	