

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

Form CDP-5
August 2004
Form must be Typed

Operator Name: American Warrior, Inc.		License Number: 4058
Operator Address: P. O. Box 399, Garden City, KS 67846		
Contact Person: Kevin Wiles, Sr.		Phone Number: (620) 275 - 2963
Permit Number (API No. if applicable): Q15-185-23,523 0000		Lease Name: Harms-Fischer
Source of Waste: <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		Well Number: 1-17
		Source Location (QQQQ): _____ - _____ - W2 - NW Sec. 17 Twp. 21S R. 13 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1300 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 650 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section STAFFORD _____ 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: 5-21-08
Operator Name: American Warrior, Inc.	License No.: 4058
Lease Name: Koopman (Hazel) 4 SWD	Sec. 20 Twp. 21s R. 13 <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No.: D-02,934	County: Stafford

RECEIVED
KANSAS CORPORATION COMMISSION

JUN 05 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 **3RD** day of **JUNE** **2008**

My Commission Expires: **09-12-09**

[Handwritten Signature]
Agent Signature

[Handwritten Signature]
Notary Public

ERICA KUHLMEIER
Notary Public - State of Kansas
My Appt. Expires **09-12-09**