

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

Form GDP-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: Joe Smith		Phone Number: (620) 275 - 2963
Permit Number (API No. if applicable): 015-163-23,684 0000		Lease Name: Allphin
Source of Waste:		Well Number: 1-30
<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		Source Location (QQQQ): NE - NE - NE Sec. 30 Twp. 10S R. 20 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 330 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 350 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section ROOKS 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: **3-21-08**

Operator Name: **American Warrior, Inc.** License No.: **4058**

Lease Name: **Schneider (Allphin) SWD** Sec. **30** Twp. **10s** R. **20** East West

Docket No.: **D-14,486** County: **Rooks**

RECEIVED
KANSAS CORPORATION COMMISSION
MAR 31 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 27th day of **MARCH**, **2008**

My Commission Expires: 09/20/09

[Signature]
Agent Signature

[Signature]
Notary Public

ERICA KUHLMEIER
Notary Public - State of Kansas
My Appt. Expires **09/20/09**

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

ERICA KUHLMEIER
Notary Public - State of Kansas
My Appt. Expires **09/20/09**