

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

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): 015-163-23,655 0000		Lease Name: Tucker
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: 10-32 Source Location (QQQQ): _____ - _____ - SE - SW Sec. 32 Twp. 9S R. 20 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 587 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 2092 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section ROOKS County

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

Amount of waste: 3 No. of loads 240 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: **12-2-07**

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

Lease Name: **RENNER 11 SWD** Sec. **5** Twp. **10S** R. **20** East West

Docket No.: **D-26,155** County: **ROOKS**

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 10 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 **9TH** day of **JANUARY**, **2008**
[Signature]
Agent Signature

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

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