



KANSAS CORPORATION COMMISSION 1031398
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: American Warrior, Inc.		License Number: 4058	
Operator Address: PO Box 399 GARDEN CITY KS 67846			
Contact Person: Scott Corsair		Phone Number: (785) 398 - 2270	
Permit Number (API No. if applicable): 15-135-249410000		Lease Name: Moore-Stieben	
Source of Waste:		Well Number: 2	
<input type="checkbox"/> Emergency Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit		<input type="checkbox"/> Dike <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape	
		Source Location (QQQQ): <u>SW</u> - <u>SW</u> - <u>SW</u> - <u>SE</u> Sec. <u>36</u> Twp. <u>18</u> R. <u>22</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>120</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2485</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Ness</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>3</u> No. of loads <u>240</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off 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 type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u>08/11/2009</u>	
Operator Name: <u>H-D Oilfield Service, Inc.</u>		License No.: <u>32970</u>	
Lease Name: <u>STRECKER</u>		Sec. <u>6</u> Twp. <u>19</u> R. <u>21</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D19026</u>		County: <u>Ness</u>	
Comments:			
<p style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">Hand 9/22/09</p>			
<p>Submitted Electronically</p>			