



KANSAS CORPORATION COMMISSION 1035637  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>American Warrior, Inc.</b>		License Number: <b>4058</b>	
Operator Address: <b>PO Box 399 GARDEN CITY KS 67846</b>			
Contact Person: <b>Scott Corsair</b>		Phone Number: ( <b>785</b> ) <b>398 - 2270</b>	
Permit Number (API No. if applicable): <b>15-135-24992-00-00</b>		Lease Name: <b>Witthuhn Heirs</b>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling 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: <b>2-35</b>	
		Source Location (QQQQ): <b>SW - NE - NE - NE</b> Sec. <b>35</b> Twp. <b>18</b> R. <b>22</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>335</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>335</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Ness</b> 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 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>02/12/2010</u>	
Operator Name: <u>American Warrior, Inc.</u>		License No.: <u>4058</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><i>David 3/10/10</i></p> <p><b>Submitted Electronically</b></p>			