

KANSAS CORPORATION COMMISSION  
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>P.O. Box 399 Garden City Ks.67846</b>			
Contact Person: <b>Joe Smith</b>		Phone Number: ( <b>620</b> ) <b>275 - 2963</b>	
Permit Number (API No. if applicable): <b>15-051-23639 0000</b>		Lease Name: <b>Chrisler</b>	
Source of Waste:		Well Number: <b>4</b>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u>  <b>C</b>  </u> - <u>  <b>NE</b>  </u> - <u>  <b>SE</b>  </u> - <u>  <b>SE</b>  </u> Sec. <u>  <b>22</b>  </u> Twp. <u>  <b>11</b>  </u> R. <u>  <b>16</b>  </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>  <b>990'</b>  </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>  <b>330'</b>  </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>  <b>Ellis</b>  </u> County	

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

Amount of waste:   **1**   No. of loads   **20**   Barrels \_\_\_\_\_ Tons \_\_\_\_\_ YDS

Destination of waste:  Reserve Pit  Haul Off 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:   **12/08/08**  

Operator Name:   **American Warrior inc**   License No.:   **4058**  

Lease Name:   **Chrisler**   Sec.   **22**   Twp.   **11**   R.   **16**    East  West

Docket No./API No.:   **E-30182**   County:   **Ellis**  

Comments: \_\_\_\_\_

RECEIVED  
DEC 14 2010  
KCC WICHITA

The undersigned hereby certifies that he / she is   **Foreman**    
 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.   *[Signature]*    
 Agent Signature  
 Subscribed and sworn to before me on this   **13**   day of   **December**  ,   **2010**    
  **Caitlin Birney**    
 Notary Public  
 My Commission Expires:   **09/10/2013**