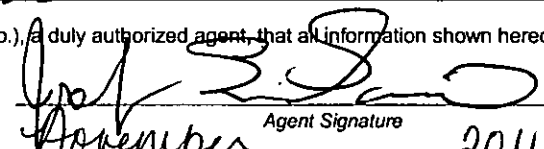
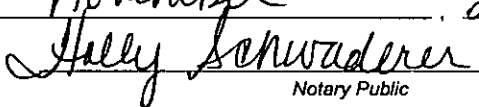



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: American Warrior Inc.		License Number: 4058	
Operator Address: P.O. box 399 Garden City Ks. 67846			
Contact Person: Jody Smith		Phone Number: (620) 275 - 2963	
Permit Number (API No. if applicable): 15-083-21693 0000		Lease Name: Schlegel	
Source of Waste:		Well Number: 1-34	
<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		Source Location (QQQQ): <u>SW</u> - <u>NW</u> - <u>SE</u> - <u>NW</u> Sec. <u>34</u> Twp. <u>22</u> R. <u>23</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1857</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1542</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Hodgeman</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>3/22/11</u>	
Operator Name: <u>American Warrior Inc.</u>		License No.: <u>4058</u>	
Lease Name: <u>Billings</u>		Sec. <u>36</u> Twp. <u>22</u> R. <u>23</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D-27511</u>		County: <u>Hodgeman</u>	
Comments:		RECEIVED NOV 10 2011 KCC WICHITA	
The undersigned hereby certifies that he / she is <u>Foreman</u> for <u>American Warrior Inc</u> (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 <u>9</u> day of <u>November</u> , <u>2011</u>		 Agent Signature	
My Commission Expires: <u>6/11/2014</u>		 Notary Public	

 **HOLLY SCHWADERER**
Notary Public - State of Kansas
My Appt Expires 6/11/2014