

15-051-22937-0000

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>American Warrior Inc.</u>		License Number: <u>4058</u>	
Operator Address: <u>P.O. box 399 Garden City Ks. 67846</u>			
Contact Person: <u>Jody Smith</u>		Phone Number: (<u>620</u>) <u>275 - 2963</u>	
Permit Number (API No. if applicable): <u>15-05-22937-0000</u>		Lease Name: <u>Hertel</u>	
Source of Waste:		Well Number: <u>A-2</u>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Workover Pit <input 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>C</u> - <u>NW</u> - <u>SE</u> - <u>NE</u> Sec. <u>1</u> Twp. <u>14</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>3640</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1250</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Ellis</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: _____ No. of loads <u>60</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input checked="" 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>11/30/11</u>	
Operator Name: <u>American Warrior Inc.</u>		License No.: <u>4058</u>	
Lease Name: <u>Luea</u>		Sec. <u>2</u> Twp. <u>14</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D-21331</u>		County: <u>Ellis</u>	
Comments:			

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DEC 05 2011
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.

Subscribed and sworn to before me on this 30 day of November, 2011

My Commission Expires: 6/11/2014

[Signature]
Agent Signature

[Signature]
Notary Public

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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