



KANSAS CORPORATION COMMISSION 1054531
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: 3118 Cummings Rd PO BOX 399 GARDEN CITY KS 67846			
Contact Person: Scott Corsair		Phone Number: (785) 398 - 2270	
Permit Number (API No. if applicable): 15-135-25220-00-00		Lease Name: LaDonna	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number: 3-29	
		Source Location (QQQQ): <u> NW </u> - <u> SE </u> - <u> NE </u> - <u> SW </u> Sec. <u> 29 </u> Twp. <u> 18 </u> R. <u> 21 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 1800 </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u> 2296 </u> Feet from <input type="checkbox"/> East / <input checked="" 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> 2 </u> No. of loads <u> 160 </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> 04/13/2011 </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:			
Submitted Electronically			