

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

| | | |
|---|--|--|
| Operator Name: Ritchie Exploration, Inc. | | License Number: 4767 |
| Operator Address: P.O. Box 783188 Wichita, KS 67278-3188 | | |
| Contact Person: John Niernberger | | Phone Number: (316) 691 - 9500 |
| Permit Number (API No. if applicable): 15-057-20628-0000 | | Lease Name: Derstein A |
| 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: #1 Source Location (QQQQ): approx. <u>SE</u> - <u>NE</u> - <u>SW</u> Sec. <u>16</u> Twp. <u>28</u> R. <u>22</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1645</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2419</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Ford County |

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

Amount of waste: _____ No. of loads 140 Barrels _____ Tons _____ YDS

Destination of waste: Reserve 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: 2/7/09

Operator Name: **Roberts Resources** License No.: **32781**

Lease Name: **Mary SWD** Sec. 16 Twp. 29S R. 18 East West

Docket No.: **D-28396** County: **Kiowa**

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WICHITA, KANSAS 67202
4/13/09
CDL
Wichita, KS

The undersigned hereby certifies that he / she is Production Manager
for Ritchie Exploration, 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 1st day of April 2009

DEBRA K. PHILLIPS
Notary Public - State of Kansas
My Appt Expires 5-4-11
My Commission Expires: 5-4-11

[Signature]
Notary Public