

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2004  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Black Diamond Oil</b>		License Number: <b>7076</b>
Operator Address: <b>P.O. Box 641 Hays, KS 67601</b>		
Contact Person: <b>Kenneth Vehige</b>		Phone Number: ( <b>785</b> ) <b>625 - 5891</b>
Permit Number (API No. if applicable): <b>15065234470000</b>		Lease Name: <b>Beecher</b>
Source of Waste:		Well Number: <b>1</b>
<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>    </u> - <u>    </u> - <u>    </u> - <u>    </u> - <u>    </u> Sec. <u>6</u> Twp. <u>10</u> R. <u>21</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2110</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2230</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Graham</u> County

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

Amount of waste: 3 No. of loads 240 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: 8/7/2008

Operator Name: Black Diamond Oil, Inc. License No.: 7076

Lease Name: Andreson A #12 SWD Sec. 16 Twp. 9 R. 21  East  West

Docket No.: D-27603 County: Graham

RECEIVED  
KANSAS CORPORATION COMMISSION  
**NOV 20 2008**  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is president  
for Black Diamond Oil, 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 3rd day of November, 2008

*[Signature]*  
Agent Signature

*[Signature]*  
Notary Public

NOTARY PUBLIC  
MELISSA L. WINDHOLZ  
My Commission Expires: 5/21/2011  
STATE OF KANSAS  
My Appt. Exp. 5/21/2011