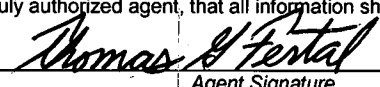
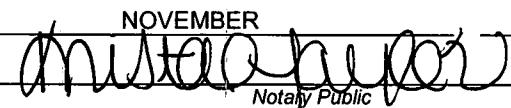


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
EXPLORATION & PRODUCTION WASTE TRANSFER

Form CDP-5
August 2004
Form must be Typed

Operator Name: SAMUEL GARY JR & ASSOCIATES, INC.	License Number: 3882
Operator Address: 1560 BROADWAY, SUITE 2100 DENVER, CO 80202	
Contact Person: TOM FERTAL	Phone Number: (303) 831-4673
Permit Number (API No. if applicable): 15-159-22584-0000	Lease Name: ORTH
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape	Well Number: 3-5 Source Location (QQQQ): <u> </u> - N/2 - S/2 - NW Sec. <u> 5 </u> Twp. <u> 19 </u> S. R. <u> 10 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 1550 </u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u> 1350 </u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u> </u> RICE 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> 4 </u> No. of loads <u> 320 </u> Barrels _____ Tons _____ YDS	
Destination of waste: <input type="checkbox"/> Reserve 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> 10/4/2008 </u>
Operator Name: <u> SAMUEL GARY JR. & ASSOCIATES, INC. </u>	License No. <u> 3882 </u>
Lease Name: <u> MATTHAEI TRUST 2-19 SWD </u>	Sec. <u> 19 </u> Twp. <u> 18 </u> S. R. <u> 9 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No. <u> D - 28897 </u>	County: <u> RICE </u>

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

The undersigned hereby certifies that he / she is <u> SR. GEOLOGIST </u> for <u> SAMUEL GARY JR & ASSOCIATES </u> _____ (CO.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief.	 _____ Agent Signature
Subscribed and sworn to before me on this <u> 18 </u> TH day of _____ _____ Notary Public	 _____ Notary Public

