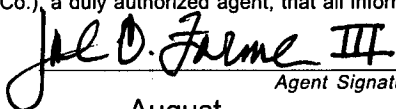



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5  
August 2004  
Form must be Typed

Operator Name: <b>John O. Farmer, Inc.</b>		License Number: <b>5135</b>	
Operator Address: <b>P.O. Box 352, Russell, KS 67665</b>			
Contact Person: <b>Marge Schulte</b>		Phone Number: ( <b>785</b> ) <b>483 - 3145, Ext. 214</b>	
Permit Number (API No. if applicable): <b>15-033-21,528-00-00</b>		Lease Name: <b>Frink Unit "A"</b>	
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: <b>#1</b>	
		Source Location (QQQQ): <u>NE</u> - <u>NW</u> - <u>NW</u> - <u>NE</u> Sec. <u>32</u> Twp. <u>32S</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West 150 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 2050 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Comanche</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>250 total</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>7-21-08 &amp; 7-30-08</u>	
Operator Name: <u>Gene R. Dill</u>		License No.: <u>9491</u>	
Lease Name: <u>Regier</u>		Sec. <u>17</u> Twp. <u>33S</u> R. <u>27</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No.: <u>C-21,232</u>		County: <u>Meade</u>	

RECEIVED  
KANSAS CORPORATION COMMISSION  
**AUG 15 2008**  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that <u>he</u> she is _____ president for <u>John O. Farmer, Inc.</u> (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 <u>13th</u> day of <u>August</u> , <u>2008</u>	 Agent Signature
My Commission Expires _____	 Notary Public

