

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

Form GDP-5  
August 2004  
Form must be Typed

Operator Name: <b>Dart Cherokee Basin Operating Co LLC</b>		License Number: <b>33074</b>										
Operator Address: <b>211 W Myrtle, Independence, Ks. 67301</b>												
Contact Person: <b>Bill Barks</b>		Phone Number: <b>( 620 ) 331 - 7870</b>										
Permit Number (API No. if applicable): <b>15-125-31721-00-00</b>		Lease Name: <b>J&amp;S Morrow</b>										
Source of Waste: <table style="width:100%; border:none;"> <tr> <td><input type="checkbox"/> Emergency Pit</td> <td><input type="checkbox"/> Dike</td> </tr> <tr> <td><input type="checkbox"/> Workover Pit</td> <td><input type="checkbox"/> Settling Pit</td> </tr> <tr> <td><input type="checkbox"/> Burn Pit</td> <td><input checked="" type="checkbox"/> Drilling Pit</td> </tr> <tr> <td><input type="checkbox"/> Steel Pit</td> <td><input type="checkbox"/> Haul-off Pit</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Spill / Escape</td> </tr> </table>		<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"/> Spill / Escape	Well Number: <b>A4-7</b>
<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"/> Spill / Escape											
Source Location (QQQQ): _____ - <b>NW</b> - <b>NE</b> - <b>NE</b> Sec. <b>7</b> Twp. <b>33S</b> R. <b>14</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>4650</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>750</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Montgomery</b> 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: _____ No. of loads <b>310</b> 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: <b>11/20/2008</b>										
Operator Name: <b>Dart Cherokee Basin Operating Co. LLC.</b>		License No.: <b>33074</b>										
Lease Name: <b>Reitz B4-35 SWD</b>		Sec. <b>35</b> Twp. <b>34S</b> R. <b>14</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West										
Docket No.: <b>D-28391</b>		County: <b>Montgomery</b>										

**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**NOV 26 2008**  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is <u>Operations Manager</u> for <u>Dart Cherokee Basin Operating</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>25th</u> day of <u>November</u> , <u>2008</u>	
My Commission Expires: _____ My Appt. Expires: <u>12-05-08</u>	Notary Public