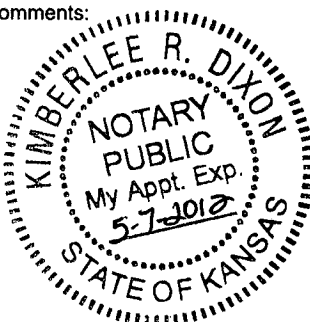


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Layne Energy Operating, LLC</u>		License Number: <u>33365</u>	
Operator Address: <u>1900 Shawnee Mission Parkway, Mission Woods, KS 66205</u>			
Contact Person: <u>Mike Taylor</u>		Phone Number: (<u>620</u>) <u>627</u> - <u>2499</u>	
Permit Number (API No. if applicable): <u>15-205-27666-0000</u>		Lease Name: <u>TUCKER</u>	
Source of Waste:		Well Number: <u>11-14</u>	
<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>NW</u> - <u>NE</u> - <u>SW</u> - _____ Sec. <u>14</u> Twp. <u>30</u> R. <u>15</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>2129</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1769</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>WILSON</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: _____ No. of loads <u>70-80</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off 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>11/03/08</u>	
Operator Name: <u>Layne Energy Operating, LLC</u>		License No.: <u>33365</u>	
Lease Name: <u>KEBERT 7-7 SWD</u>		Sec. <u>7</u> Twp. <u>30</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>D-28752/15-205-26447-0000</u>		County: <u>WILSON</u>	
Comments:			
		RECEIVED MAY 26 2009	
The undersigned hereby certifies that he / she is _____ Agent for <u>Layne Energy Operating, LLC</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief.		<u>Mike Taylor</u> Agent Signature	
Subscribed and sworn to before me on this <u>15th</u> day of <u>May</u> <u>2009</u>		<u>Kimberlee R. Dixon</u> Notary Public	
My Commission Expires: <u>May 7, 2012</u>			