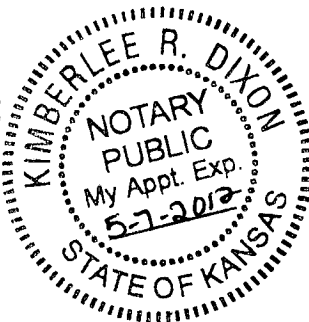
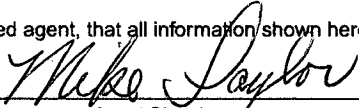
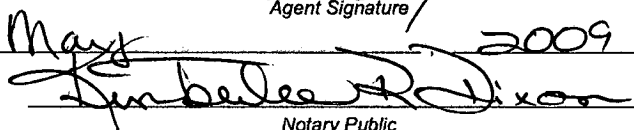


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form GDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Layne Energy Operating, LLC</b>		License Number: <b>33365</b>
Operator Address: <b>1900 Shawnee Mission Parkway, Mission Woods, KS 66205</b>		
Contact Person: <b>Mike Taylor</b>		Phone Number: ( <b>620</b> ) <b>627 - 2499</b>
Permit Number (API No. if applicable): <b>15-205-27740-0000</b>		Lease Name: <b>TUCKER</b>
Source of Waste: <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		Well Number: <b>3-14</b> Source Location (QQQQ): <b>W2 - NE - NW -</b> Sec. <b>14</b> Twp. <b>30</b> R. <b>15</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>693</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>1697</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>WILSON</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 <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>1/05/09</u>
Operator Name: <b>Layne Energy Operating, LLC</b>		License No.: <b>33365</b>
Lease Name: <b>BAILEY 5-24 SWD</b>		Sec. <b>24</b> Twp. <b>30</b> R. <b>15</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: <b>D-30314/15-205-27567-00-00</b>		County: <b>Wilson</b>
Comments:		
		
<p>RECEIVED MAY 26 2009 KCC WICHITA</p>		
The undersigned hereby certifies that he / she is <u>Agent</u> 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.		
Subscribed and sworn to before me on this <u>15</u> day of <u>May</u> <u>2009</u>		 Agent Signature
My Commission Expires: <u>May 7, 2012</u>		 Notary Public