

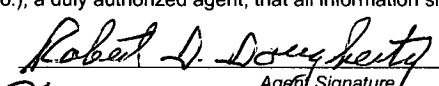
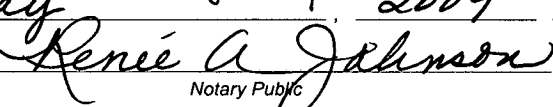
KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Cambria Corporation		License Number: 6015
Operator Address: P.O. Box 1065 Great Bend, Kansas 67530		
Contact Person: Robert D. Dougherty		Phone Number: (620) 793 - 9055
Permit Number (API No. if applicable): 185-00183-0001		Lease Name: Fritzemeier
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: 2 Source Location (QQQQ): <u> </u> - SW - <u> </u> - SE - <u> </u> - NW Sec. 33 Twp. 22s R. 11w <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2310</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1675</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Stafford 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> 160 </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: 1/8/09 & 3/6/09
Operator Name: Paul's Oilfield Service		License No.: 31085
Lease Name: Stargel		Sec. 4 Twp. 22s R. 12w <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: 21908		County: Stafford
Comments:		

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MAY 29 2009
KCC WICHITA

The undersigned hereby certifies that he / she is <u>President (Robert D. Dougherty)</u>	
for <u>Cambria Corporation</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>27th</u> day of <u>May</u> <u>2009</u>	 Agent Signature
My Commission Expires: _____	 Notary Public

