

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>ARES Energy, Ltd.</b>		License Number: <b>33770</b>	
Operator Address: <b>303 West Wall Street, Suite 900, Midland, Texas 79701</b>			
Contact Person: <b>Brian P. Ramey</b>		Phone Number: ( <b>432</b> ) <b>685 - 1960</b>	
Permit Number (API No. if applicable): <b>15-053-21204-0000</b>		Lease Name: <b>Schepmann</b>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling 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>3-27</b>	
		Source Location (QQQQ): <u>      </u> - <b>NE</b> - <u>      </u> - <b>SW</b> - <u>      </u> - <b>SE</b> Sec. <b>27</b> Twp. <b>17S</b> R. <b>10</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>990</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1650</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Ellsworth</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>0</u> No. of loads <u>0</u> Barrels      _____ Tons      _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input 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: _____	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: _____	
Comments: <p style="text-align: center;">No waste transferred from location. Fluid Allowed to Dry.</p>			
<p><b>RECEIVED</b> <b>MAR 18 2009</b> <b>KCC WICHITA</b></p>			

The undersigned hereby certifies that he / she is OPERATIONS MANAGER  
for ARES ENERGY, LTD (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 17 day of MARCH, 2009

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_  
**MELISSA L. BRAMLEY**  
MY COMMISSION EXPIRES  
September 8, 2009

