


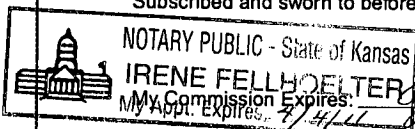
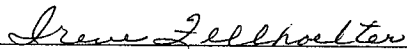
KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Flatirons Resources, LLC		License Number: 34038	
Operator Address: 303 East 17th, Suite 940, Denver, CO 80203			
Contact Person: Jeff Jones		Phone Number: (303) 292 - 3902	
Permit Number (API No. if applicable): 15-065-23496-00-00		Lease Name: Mahoney-Chenowith	
Source of Waste:		Well Number: 33-36	
<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>SW</u> - <u>NW</u> - <u>SE</u> - _____ Sec. <u>36</u> Twp. <u>7S</u> R. <u>24S</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1500</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2350</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Graham</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>2</u> No. of loads <u>150</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>3-26-09</u>	
Operator Name: <u>H & C Oil Operating, Inc.</u>		License No.: <u>8914</u>	
Lease Name: <u>Waller #5 SWD</u>		Sec. <u>3</u> Twp. <u>7S</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D-24, 512</u>		County: <u>Rooks</u>	
Comments:			

KANSAS CORPORATION COMMISSION
APR 13 2009
RECEIVED

The undersigned hereby certifies that he / she is <u>AGENT</u>	
for <u>FLATIRONS RESOURCES, 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>9th</u> day of <u>April</u> , <u>2009</u>	 _____ Agent Signature
 NOTARY PUBLIC - State of Kansas IRENE FELLHOELTER My Commission Expires: <u>April 4, 2011</u>	 _____ Notary Public