

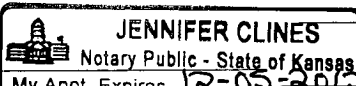
KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Dart Cherokee Basin Operating Co LLC		License Number: 33074
Operator Address: 211 W Myrtle, Independence, Ks. 67301		
Contact Person: Bill Barks		Phone Number: (620) 331 - 7870
Permit Number (API No. if applicable): 15-125-31650-00-00		Lease Name: C&D Springer Trusts
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: A2-17 Source Location (QQQQ): <u> </u> - <u>W2</u> - <u>NE</u> - <u>NW</u> Sec. <u>17</u> Twp. <u>32S</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>4620</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>3425</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Montgomery</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>480</u> Barrels _____ Tons _____ YDS		
Destination of waste: <input type="checkbox"/> Reserve 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>8/28/2008</u>
Operator Name: <u>Dart Cherokee Basin Operating Co. LLC.</u>		License No.: <u>33074</u>
Lease Name: <u>Porter et al D1-9 SWD</u>		Sec. <u>9</u> Twp. <u>30S</u> R. <u>15</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
Docket No.: <u>D-28773</u>		County: <u>Wilson</u>

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KCC WICHITA

The undersigned hereby certifies that he / she is <u>Operations Manager</u>	
for <u>Dart Cherokee Basin Operating</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>Bill Barks</u> Agent Signature	
Subscribed and sworn to before me on this <u>29th</u> day of <u>June</u> <u>2009</u> .	
My Commission Expires: _____	
	<u>Jennifer Clines</u> Notary Public