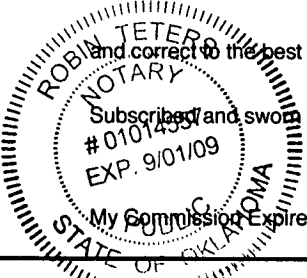


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Tailwater, Inc.</b>		License Number: <b>32461</b>	
Operator Address: <b>6421 Avondale Dr., Ste. 212, OKC, OK 73116</b>			
Contact Person: <b>Christian L. Martin</b>		Phone Number: ( <b>405</b> ) <b>810</b> - <b>0900</b>	
Permit Number (API No. if applicable): <b>15-003-24626-0000</b>		Lease Name: <b>Kempnich</b>	
Source of Waste:		Well Number: <b>23-T</b>	
<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		Source Location (QQQQ): <u>ne</u> <u>se</u> <u>sw</u> <u>nw</u> Sec. <u>22</u> Twp. <u>20</u> R. <u>20</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>2095</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1305</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Anderson</u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input checked="" type="checkbox"/> Other: <u>Not applicable</u>			
Amount of waste:    _____ No. of loads    _____ 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: <b>All wells were drilled with an air rig. There were no fluids hauled to locations while drilling.</b>			
<p>RECEIVED FEB 17 2009 KCC WICHITA</p>			
The undersigned hereby certifies that he / she is <u>CHRISTIAN A. MARTIN</u> for <u>TAILWATER</u> (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 _____ day of _____		_____ Notary Public	
My Commission Expires: <u>9-01-09</u>			