

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form GDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

| | |
|---|---|
| Operator Name: Murfin Drilling Co., Inc. | License Number: 30606 |
| Operator Address: 250 N Water Suite 300 Wichita KS 67202 | |
| Contact Person: Stan Froetschner | Phone Number: (785) 483 - 5371 |
| Permit Number (API No. if applicable): 15185235530000 | Lease Name: Fischer-Hullman |
| 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: 1-12 |
| | Source Location (QQQQ): _____ Sec. 12 Twp. 22S R. 13 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 330 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 150 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Stafford County |

Type of waste to be disposed: Fluid Soil Mud / Cuttings Other: _____

Amount of waste: _____ No. of loads **240** Barrels _____ Tons _____ YDS

Destination of waste: Reserve Pit Disposal Well Lease Road Dike / Berm Other: _____

If waste is transferred to another reserve pit, is the lease active? Yes No

| | |
|---|---|
| Location of waste disposal: | Date of Waste Transfer: 10/27/08 |
| Operator Name: Ellinwood Tank Service, Inc | License No.: 4297 |
| Lease Name: Stueder #2 SWD | Sec. 5 Twp. 20W R. 10 <input type="checkbox"/> East <input checked="" type="checkbox"/> West |
| Docket No.: D 15,781 | County: Rice |

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KANSAS CORPORATION COMMISSION
NOV 05 2008
CONSERVATION DIVISION
WICHITA, KS

The undersigned hereby certifies that he / she is Production Superintendent
for Murfin Drilling Co., Inc. (Co.), a duly authorized agent, that all information shown hereon is true
and correct to the best of his / her knowledge and belief. *Stan Froetschner*
Agent Signature

Subscribed and sworn to before me on this 3rd day of November, 2008

Maureen E. Axelson
Notary Public

My Commission Expires: 7-19-11