

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

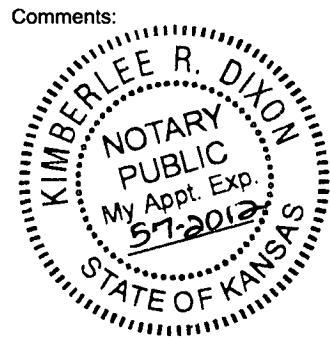
Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Layne Energy Operating, LLC</b>		License Number: <b>33365</b>
Operator Address: <b>1900 Shawnee Mission Parkway, Mission Woods, KS 66205</b>		
Contact Person: <b>Mike Taylor</b>		Phone Number: ( <b>620</b> ) <b>627</b> - <b>2499</b>
Permit Number (API No. if applicable): <b>15-125-31803-0000</b>		Lease Name: <b>MCMILLIN</b>
Source of Waste:  <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		Well Number: <b>13-2</b>
		Source Location (QQQQ): <b>E2 - SW - SW -</b>
		Sec. <b>2</b> Twp. <b>33</b> R. <b>16</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>530</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>676</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>MONTGOMERY</b> 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 <b>70-80</b> 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: <b>11/17/08</b>
Operator Name: <b>Layne Energy Operating, LLC</b>	License No.: <b>33365</b>
Lease Name: <b>SCHMIDT 14-4 SWD</b>	Sec. <b>4</b> Twp. <b>33</b> R. <b>16</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: <b>D-28098/15-125-30181-0000</b>	County: <b>Montgomery</b>



RECEIVED  
MAY 29 2009  
KCC WICHITA

The undersigned hereby certifies that he / she is Agent  
for Layne Energy Operating, LLC (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 15<sup>th</sup> day of May, 2009.

My Commission Expires: May 7, 2012

*Mike Taylor*  
Agent Signature

*Kimberlee R Dixon*  
Notary Public