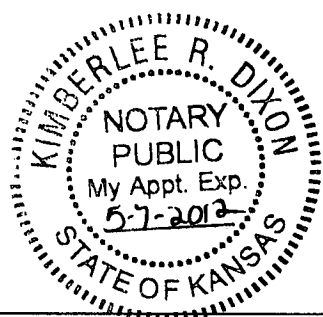
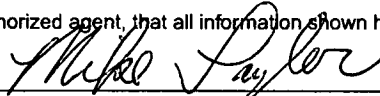
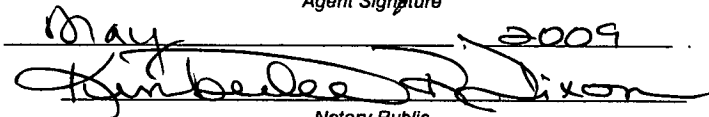


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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 - 2499</b>	
Permit Number (API No. if applicable): <b>15-125-31804-0000</b>		Lease Name: <b>BOGART</b>	
Source of Waste:		Well Number: <b>12-16</b>	
<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>W2</u> - <u>SW</u> - <u>SW</u> - _____ Sec. <u>16</u> Twp. <u>33</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>1476</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>504</u> 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 <u>70-80</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>02/20/09</u>	
Operator Name: <u>Layne Energy Operating, LLC</u>		License No.: <u>33365</u>	
Lease Name: <u>SCHMIDT 14-4 SWD</u>		Sec. <u>4</u> Twp. <u>33</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>D-28098/15-125-30181-0000</u>		County: <u>Montgomery</u>	
Comments:			
		<b>RECEIVED</b> <b>MAY 26 2009</b> <b>KCC WICHITA</b>	
		The undersigned hereby certifies that he / she is <u>Agent</u> for <u>Layne Energy Operating, 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>15<sup>th</sup></u> day of <u>May</u> , <u>2009</u> . My Commission Expires: <u>May 7, 2012</u>	
		 Agent Signature	
		 Notary Public	