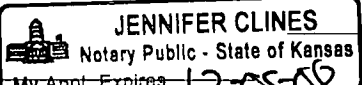


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5  
August 2004  
Form must be Typed

Operator Name: <b>Dart Cherokee Basin Operating Co LLC</b>		License Number: <b>33074</b>	
Operator Address: <b>211 W Myrtle, Independence, Ks. 67301</b>			
Contact Person: <b>Bill Barks</b>		Phone Number: ( <b>620</b> ) <b>331 - 7870</b>	
Permit Number (API No. if applicable): <b>15-205-27568-00-00</b>		Lease Name: <b>W&amp;D Baker</b>	
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: <b>D3-23</b> Source Location (QQQQ): _____ - <b>SW</b> - <b>SW</b> - <b>SE</b> Sec. <b>23</b> Twp. <b>30S</b> R. <b>14</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>350</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>2050</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Wilson</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>480</b> 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: <b>10/22/2008</b>	
Operator Name: <b>Dart Cherokee Basin Operating Co. LLC.</b>		License No.: <b>33074</b>	
Lease Name: <b>Porter et al D1-9 SWD</b>		Sec. <b>9</b> Twp. <b>30S</b> R. <b>15</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No.: <b>D-28773</b>		County: <b>Wilson</b>	

**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**NOV 07 2008**  
CONSERVATION DIVISION  
WICHITA, KS

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><i>Bill Barks</i></u> <span style="float: right; font-size: small;">Agent Signature</span>	
Subscribed and sworn to before me on this <u>6th</u> day of <u>November</u> , <u>2008</u> .	
My Commission Expires: _____ <div style="border: 1px solid black; padding: 2px; display: inline-block;">  <b>JENNIFER CLINES</b>          Notary Public - State of Kansas          My Appt. Expires <u>12-05-08</u> </div>	<u><i>Jennifer Clines</i></u> Notary Public