

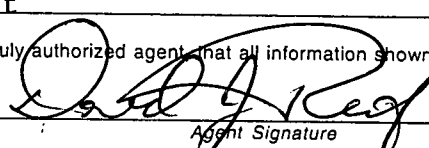
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**SURFACE POND WASTE TRANSFER**

Form CDP-5  
August 2003  
Form must be Typed

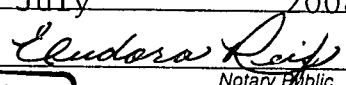
Operator Name: <u>Reif Oil &amp; Gas Co., LLC</u>	License Number: <u>33530</u>
Operator Address: <u>PO Box 298 Hoisington, KS 67544</u>	
Contact Person: <u>Don J. Reif</u>	Phone Number: <u>(620) 786-5698</u>
Permit Number (API No. if applicable): <u>API 15-009251280000</u>	Lease Name: <u>Reuben Jean #1</u>
Type of Pond: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Treatment Pit <input type="checkbox"/> Workover Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit	Pit Location: Sec. <u>19</u> Twp. <u>17</u> S. R. <u>14</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1815</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>925</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Barton</u> County
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Mud / Cuttings	
Amount of waste: <u>6</u> No. of loads <u>480</u> Barrels	
Destination of waste: <input type="checkbox"/> Reserve Pit <input checked="" type="checkbox"/> Disposal Well	
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location of waste disposal:	<u>Date of Transferred = 11/13 - 11/23/07</u>
Operator Name: <u>Leon's Atkerson Oil</u>	License No. <u>OP# 32670</u>
Lease Name: <u>Karst SWD</u>	Sec. <u>21</u> Twp. <u>15</u> S. R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No. <u>D-22158</u>	County: <u>Russell</u>

RECEIVED  
KANSAS CORPORATION COMMISSION  
  
**JUL 18 2008**  
  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is President  
for Reif Oil & Gas Co., LLC (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 16th day of July, 2008.

  
 Notary Public

**EUDORA REIF**  
Notary Public - State of Kansas  
My Appt. Expires 12-23-2008

My Commission Expires: \_\_\_\_\_