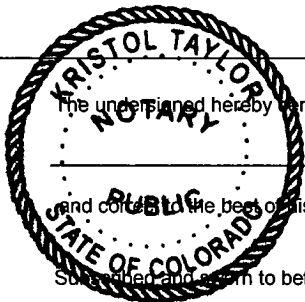


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2004  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

|  |  |
|--|--|
| Operator Name: SAMUEL GARY JR & ASSOCIATES, INC.   | License Number: 3882   |
| Operator Address: 1560 BROADWAY, SUITE 2100 DENVER, CO 80202   |  |
| Contact Person: TOM FERTAL   | Phone Number: (303) 831-4673   |
| Permit Number (API No. if applicable): 15-159-22565-0000   | Lease Name: STAFFORD   |
| Source of Waste:<br><input type="checkbox"/> Dike<br><input type="checkbox"/> Emergency Pit<br><input type="checkbox"/> Settling Pit<br><input type="checkbox"/> Workover Pit<br><input checked="" type="checkbox"/> Drilling Pit<br><input type="checkbox"/> Burn Pit<br><input type="checkbox"/> Haul-off Pit<br><input type="checkbox"/> Steel Pit<br><input type="checkbox"/> Spill / Escape   | Well Number: 2-23<br>Source Location (QQQQ): _____ - N/2 - NE - SE<br>Sec. <u>23</u> Twp. <u>18</u> S. R. <u>10</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West<br><u>2285</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section<br><u>510</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section<br>RICE 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: <u>2</u> No. of loads <u>160</u> 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: <u>4/2/2008</u>  |
| Operator Name: <u>SAMUEL GARY JR. &amp; ASSOCIATES, INC.</u>   | License No. <u>3882</u>  |
| Lease Name: <u>MATTHAEI TRUST 2-19 SWD</u>   | Sec. <u>19</u> Twp. <u>18</u> S. R. <u>9</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West  |
| Docket No. <u>D - 28897</u>  | County: <u>RICE</u>  |
| <b>RECEIVED</b><br>KANSAS CORPORATION COMMISSION<br><b>JUN 09 2008</b><br>CONSERVATION DIVISION<br>WICHITA, KS   |  |
|  The undersigned hereby certifies that he / she is <u>SR. GEOLOGIST</u> for <u>SAMUEL GARY JR &amp; ASSOCIATES</u><br>(CO.), a duly authorized agent, that all information shown hereon is true<br>and correct to the best of his / her knowledge and belief.<br>Subscribed and sworn to before me on this <u>5 TH</u> day of <u>JUNE</u> , 2008.<br>My Commission Expires <u>5/05/2009</u><br>My Commission Expires: _____ | <u>Thomas J Fertal</u><br>Agent Signature<br><u>Kristol Taylor</u><br>Notary Public  |