

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form GCP-5  
August 2004  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <b>COLT ENERGY, INC</b>		License Number: <b>5150</b>	
Operator Address: <b>P O BOX 388</b>			
Contact Person: <b>DENNIS KERSHNER</b>		Phone Number: ( <b>620</b> ) <b>365 - 3111</b>	
Permit Number (API No. if applicable): <b>15-031-22,302 0000</b>		Lease Name: <b>BEARD</b>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit		Well Number: <b>1-1</b>	
<input type="checkbox"/> Dike <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <b>NE - NE - NE - NE</b>	
		Sec. <b>11</b> Twp. <b>23</b> R. <b>16</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
		<b>235</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section	
		<b>50</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section	
		<b>COFFEY</b> County	

Type of waste to be disposed:  Fluid  Soil  Mud / Cuttings  Other: \_\_\_\_\_

Amount of waste: \_\_\_\_\_ No. of loads **80** Barrels \_\_\_\_\_ Tons \_\_\_\_\_ YDS

Destination of waste:  Reserve Pit  Disposal Well  Lease Road  Dike / Berm  Other: \_\_\_\_\_

If waste is transferred to another reserve pit, is the lease active?  Yes  No

Location of waste disposal: \_\_\_\_\_ Date of Waste Transfer: **6-17-07**

Operator Name: **COLT ENERGY, INC** License No.: **5150**

Lease Name: **MURRAY SWD1** Sec. **2** Twp. **23** R. **16**  East  West

Docket No.: **D-28,297** County: **COFFEY**

RECEIVED  
KANSAS CORPORATION COMMISSION  
**MAY 02 2008**  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is **AGENT**  
for **COLT ENERGY, INC** (Co.), a duly authorized agent, that all information shown hereon is true

and correct to the best of his / her knowledge and belief.  
**SHIRLEY A. STOTLER**  
Notary Public - State of Kansas  
Subscribed and sworn to before me on this **29th** day of **April**, **2008**

*Dennis Kershner*  
Agent Signature  
*Shirley A. Stotler*  
Notary Public

My Commission Expires: **1-20-2012**