

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

Form CDP-5  
August 2004  
Form must be Typed

Operator Name: <b>IA Operating, Inc</b>		License Number: <b>33355</b>	
Operator Address: <b>9915 W. 21st Street, Ste B Wichita, KS 67205</b>			
Contact Person: <b>Hal Porter</b>		Phone Number: ( <b>316</b> ) <b>721</b> - <b>0036</b>	
Permit Number (API No. if applicable): <b>15-065-23402-0000</b>		Lease Name: <b>Jerry</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>19-1</b>	
		Source Location (QQQQ): <b>NW - SW - SE -</b>	
		Sec. <b>19</b> Twp. <b>8</b> R. <b>25</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1120 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 2310 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Graham</b> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u>0</u> No. of loads <u>0</u> Barrels <u>0</u> Tons <u>0</u> YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input 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: _____	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No.: _____		County: _____	

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

The undersigned hereby certifies that he / she is President  
for IA Operating, Inc. (Co.), a duly authorized agent that all information shown hereon is true

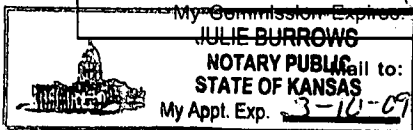
and correct to the best of his / her knowledge and belief.

*Hal Porter*  
Agent Signature

Subscribed and sworn to before me on this 1 day of May, 2008

*Julie Burrows*  
Notary Public

*expire 11-10-2009*



KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202