

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

Form CDP-5
August 2004
Form must be Typed

Operator Name: <u>Charles N. Griffin</u>		License Number: <u>33936</u>	
Operator Address: <u>P.O. 670 Byers, CO. 80103</u>			
Contact Person: <u>Charles Griffin</u>		Phone Number: <u>(620) 680-1262</u>	
Permit Number (API No. if applicable): <u>185-23499-0000</u>		Lease Name: <u>Rice</u>	
Source of Waste:		Well Number: <u>1</u>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Bum Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u> </u> - <u>s/2</u> - <u>s/2</u> - <u>NE</u> Sec. <u>29</u> Twp. <u>23s</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2210</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1320</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Stafford</u> 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>14</u> No. of loads <u>1040</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>1/14/08 thru 1/15/08</u>	
Operator Name: <u>Bob's Oil Service</u>		License No.: <u>33408</u>	
Lease Name: <u>Teichmann</u>		Sec. <u>16</u> Twp <u>22s</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No.: <u>D-23,722</u>		County: <u>Stafford</u>	

RECEIVED
KANSAS CORPORATION COMMISSION
FEB 20 2008
CONSERVATION DIVISION
WICHITA, KS

The undersigned hereby certifies that he / she is Bennie L. Griffin
for Charles N. Griffin (Co.), a duly authorized agent, that all information shown hereon is true
and correct to the best of his / her knowledge and belief.

Subscribed and sworn to before me on this 19th day of February, 2008

[Handwritten Signature]
Agent Signature

[Handwritten Signature]
Notary Public

Cheryl A. Smith
NOTARY PUBLIC
State of Kansas
MY COM. EXPIRES 7-12-2008

My Commission Expires: _____