

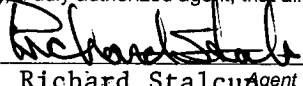

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Globe Operating, Inc.</u>		License Number: <u>6170</u>	
Operator Address: <u>P.O.Box 12 Great Bend, KS 67530</u>			
Contact Person: <u>Richard Stalcup</u>		Phone Number: (<u>620</u>) <u>792-7607</u>	
Permit Number (API No. if applicable): <u>15,185-23,589-00-00</u>		Lease Name: <u>Spangenberg</u>	
Source of Waste: <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"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Well Number: <u>A-1</u>	
		Source Location (QQQQ): <u>C</u> <u>SW</u> <u>SW</u> <u>NW</u> Sec. <u>10</u> Twp. <u>21</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2310</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>460</u> Feet from <input type="checkbox"/> East / <input checked="" 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: _____ No. of loads • <u>320</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off 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>9-16-09</u>	
Operator Name: <u>Paul's Oilfield Service</u>		License No.: <u>31085</u>	
Lease Name: <u>Stargel # 2</u>		Sec. <u>4</u> Twp. <u>22</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>P 21,908 / 0</u>		County: <u>Stafford</u>	
Comments:			

RECEIVED
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KCC WICHITA

The undersigned hereby certifies that he / she is <u>Richard Stalcup, Prod. Super.</u>	
for <u>Globe Operating, Inc.</u> (Co.) a duly authorized agent, that all information shown hereon is true	
and correct to the best of his / her knowledge and belief.	
 <u>Richard Stalcup</u> Agent Signature	
Subscribed and sworn to before me on this <u>15th</u> day of <u>October</u> , <u>2009</u>	
 <u>M. Lynne Wooster</u> Notary Public	

NOTARY PUBLIC - State of Kansas
M. LYNNE WOOSTER
 My Appt. Exp. 4-2-11