

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

Form CDP-5
August 2004
Form must be Typed

Operator Name: COLT ENERGY, INC		License Number: 5150
Operator Address: P O BOX 388		
Contact Person: DENNIS KERSHNER		Phone Number: (620) 365 - 3111
Permit Number (API No. if applicable): 15-125-31,691 (600)		Lease Name: BLAKE
Source of Waste:		Well Number: 6-15
<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		Source Location (QQQQ): <u> N2 </u> - <u> SE </u> - <u> SE </u> - <u> NW </u> Sec. <u> 15 </u> Twp. <u> 32 </u> R. <u> 17 </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u> 2240 </u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u> 2310 </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u> MONTGOMERY </u> County

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

Amount of waste: _____ No. of loads **150** 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: **11-2-09**

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

Lease Name: **FOSTER 1-36 SWD** Sec. **36** Twp. **31** R. **17** East West

Docket No.: **D-28,692** County: **LABETTE**

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NOV 09 2009
KCC WICHITA

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.

Subscribed and sworn to before me on this **6th** day of **November** , **2009**

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

Shirley A. Stotler
Notary Public

_____ *Dennis Kershner*
Agent Signature