

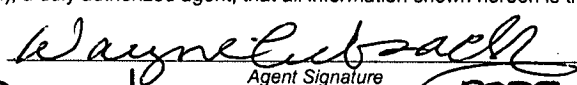
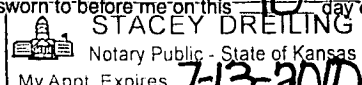
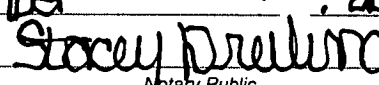
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <u>Lebsack Oil Production, Inc.</u>		License Number: <u>5210</u>	
Operator Address: <u>P.O. Box 489, Hays, KS 67601</u>			
Contact Person: <u>Wayne Lebsack</u>		Phone Number: ( <u>620</u> ) <u>938-2396</u>	
Permit Number (API No. if applicable): <u>15055220490000</u>		Lease Name: <u>Garden City</u>	
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: <u>#4-18</u>	
		Source Location (QQQQ): <u>SE - NW - SE -</u> Sec. <u>18</u> Twp. <u>22S</u> R. <u>33E</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1650</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1650</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section _____ 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>160</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>Sept. 23, '09 &amp; Sept. 29, '09</u>	
Operator Name: <u>Lebsack Oil Production, Inc.</u>		License No.: <u>5210</u>	
Lease Name: <u>Bidwell #4-13</u>		Sec. <u>13</u> Twp. <u>23</u> R. <u>34</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D26490</u>		County: <u>Finney</u>	
Comments:			

**RECEIVED**  
**DEC 11 2009**  
**KCC WICHITA**

The undersigned hereby certifies that he / she is <u>President</u>	
for <u>Lebsack Oil Production, 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.	
Subscribed and sworn to before me on this <u>10</u> day of <u>December</u> , <u>2009</u>	 _____ Agent Signature
 Notary Public - State of Kansas My Appt Expires <u>7-13-2010</u>	 _____ Notary Public
My Commission Expires: _____	