

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>REDLAND RESOURCES, INC.</b>		License Number: <b>32204</b>	
Operator Address: <b>6001 NW 23RD STREET, OKLAHOMA CITY, OK 73127</b>			
Contact Person: <b>ALAN THROWER</b>		Phone Number: ( <b>405</b> ) <b>789 - 7104</b>	
Permit Number (API No. if applicable): <b>15-033-21565-00-00</b>		Lease Name: <b>WARREN</b>	
Source of Waste:		Well Number: <b>24-11</b>	
<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>    </u> - <u><b>C</b></u> - <u><b>NE</b></u> - <u><b>SW</b></u> Sec. <u><b>24</b></u> Twp. <u><b>33S</b></u> R. <u><b>17</b></u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u><b>1980</b></u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u><b>1925</b></u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u><b>COMANCHE</b></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><b>140</b></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><b>11/29/09</b></u>	
Operator Name: <u><b>OIL PRODUCERS, INC. OF KANSAS</b></u>		License No.: <u><b>8061</b></u>	
Lease Name: <u><b>RICH C-9 SWD</b></u>		Sec. <u><b>22</b></u> Twp. <u><b>32s</b></u> R. <u><b>19</b></u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u><b>D 28178 v 0</b></u>		County: <u><b>COMANCHE</b></u>	
Comments:			

**RECEIVED**  
**DEC 21 2009**  
**KCC WICHITA**

The undersigned hereby certifies that he / she is **PRESIDENT**  
for **REDLAND RESOURCES, INC** (Co.), a duly authorized agent, that all information shown hereon is true

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

*Alan Thrower*  
Agent Signature

Subscribed and sworn to before me on this **DECEMBER** day of **2009**.

*Christy J...*  
Notary Public

My Commission Expires: **EXP. 10/30/10**

