

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <b>VAL ENERGY INC</b>		License Number: <b>5822</b>	
Operator Address: <b>200 W. DOUGLAS SUITE 520</b>			
Contact Person: <b>K. TODD ALLAM</b>		Phone Number: ( <b>316</b> ) <b>263 - 6688</b>	
Permit Number (API No. if applicable): <b>15-007-23479-00-00</b>		Lease Name: <b>PAXTON KUBIK</b>	
Source of Waste:  <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling 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: <b>11-28</b>	
		Source Location (QQQQ): <u><b>N2 - N2 - SW - NE</b></u> Sec. <u><b>28</b></u> Twp. <u><b>34</b></u> R. <u><b>11</b></u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u><b>3795</b></u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u><b>1980</b></u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u><b>BARBER</b></u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u><b>3</b></u> No. of loads <u><b>240</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 checked="" type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u><b>12/11/2009</b></u>	
Operator Name: <u><b>VAL ENERGY INC</b></u>		License No.: <u><b>5822</b></u>	
Lease Name: <u><b>PAXTON KUBIK SWD</b></u>		Sec. <u><b>28</b></u> Twp. <u><b>34</b></u> R. <u><b>11</b></u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u><b>D30309</b></u>		County: <u><b>BARBER</b></u>	
Comments:			

RECEIVED  
KANSAS CORPORATION COMMISSION

FEB 22 2010

CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is **Agent**  
 for **VAL Energy** (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 **12** day of **JANUARY**, **2010**

My Commission Expires: **2/24/2010**

NOTARY PUBLIC - State of Kansas  
 BRANDI WYER  
 My Appt. Expires **2/24/2010**

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202