

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Castle Resources Inc.		License Number: 9860
Operator Address: PO Box 87 Schoenchen, KS 67667		
Contact Person: Jerry Green		Phone Number: (785) 625 - 5155
Permit Number (API No. if applicable): 15-165-21872-00-00		Lease Name: Eisenhour
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: 1 Source Location (QQQQ): <u>SW</u> - <u>SE</u> - <u>NW</u> - <u>NE</u> Sec. <u>29</u> Twp. <u>16</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1060</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1700</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Rush 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: <u>7</u> No. of loads <u>560</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>3/17/10</u>
Operator Name: <u>Saxon Oil Company</u>		License No.: <u>34004</u>
Lease Name: <u>Stull</u>		Sec. <u>14</u> Twp. <u>16S</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <u>D-28081</u>		County: <u>Rush</u>
Comments:		

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The undersigned hereby certifies that he / she is PRESIDENT
for CASTLE 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.

Subscribed and sworn to before me on this 30th day of MARCH, 2010

Katherine Bray
Notary Public

My Commission Expires: 7-3-12

