

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <b>Gene Karlin Company</b>		License Number: <b>3444</b>	
Operator Address: <b>1111 Oakmont St., Hays, Kansas 67601</b>			
Contact Person: <b>Gene Karlin</b>		Phone Number: ( <b>785</b> ) <b>623</b> - <b>1083</b>	
Permit Number (API No. if applicable): <b>15-163-21222-0001</b>		Lease Name: <b>Veverka</b>	
Source of Waste:		Well Number: <b>#2</b>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Workover Pit <input 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): <b>NW - SE - SW -</b> Sec. <b>6</b> Twp. <b>9S</b> R. <b>18</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>990</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>3630</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section _____ Rooks _____ 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 <b>65</b> 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: <b>7-15-2009</b>	
Operator Name: <b>Caerus Kansas, LLC</b>		License No.: <b>34110</b>	
Lease Name: <b>Alphin #4</b>		Sec. <b>33</b> Twp. <b>9S</b> R. <b>21</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <b>D-30345</b>		County: <b>Graham</b>	
Comments:			
<div style="display: inline-block; width: 40%;"> <p><b>RECEIVED</b></p> <p><b>JUL 15 2010</b></p> <p><b>KCC WICHITA</b></p> </div> <div style="display: inline-block; width: 50%; border: 1px solid black; padding: 5px;"> <p>NOTARY PUBLIC - State of Kansas</p> <p><b>BRIAN KARLIN</b></p> <p>My Appt. Expires <b>8-27-2013</b></p> </div>			
The undersigned hereby certifies that he / she is <u>Gene Karlin</u> for <u>Gene Karlin Company</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. <u>Gene Karlin</u> Agent Signature Subscribed and sworn to before me on this <u>8<sup>th</sup></u> day of <u>July</u> , <u>2010</u> <u>Brian Karlin</u> Notary Public My Commission Expires: <u>8-27-2013</u>			