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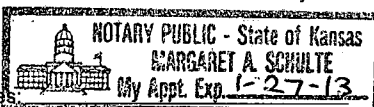
JUL 14 2010

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

KCC WICHITA

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>John O. Farmer, Inc.</u>		License Number: <u>5135</u>	
Operator Address: <u>P.O. Box 352, Russell, KS 67665</u>			
Contact Person: <u>Marge Schulte</u>		Phone Number: <u>(785) 483 - 3145, Ext. 214</u>	
Permit Number (API No. if applicable): <u>15-167-23,634-00-00</u>		Lease Name: <u>Maupin 'C'</u>	
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: <u>#1</u>	
		Source Location (QQQQ): <u>S/2 - SW - NW - SE</u> Sec. <u>10</u> Twp. <u>11S</u> R. <u>15</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1535</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2310</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Russell</u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input checked="" type="checkbox"/> Other: <u>drilling mud & water</u>			
Amount of waste: <u>4</u> No. of loads <u>320 total</u> Barrels <u> </u> Tons <u> </u> YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input checked="" type="checkbox"/> Other: <u>haul-off pit</u>			
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>6-17-10</u>	
Operator Name: <u>John O. Farmer, Inc.</u>		License No.: <u>5135</u>	
Lease Name: <u>Maupin "B" #1 Haul-Off Pit</u>		Sec. <u>32</u> Twp. <u>11S</u> R. <u>15</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No.:		County: <u>Russell</u>	
<p>The undersigned hereby certifies that <u>he</u> / she is <u>President</u> for <u>John O. Farmer, Inc.</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of <u>his</u> / her knowledge and belief.</p> <p>Subscribed and sworn to before me on this <u>13th</u> day of <u>July</u>, <u>2010</u></p> <p>My Commission Expires: <u>1-27-13</u></p>			
		<u>John O. Farmer III</u> Agent Signature	
		<u>Margaret A. Schulte</u> Notary Public	