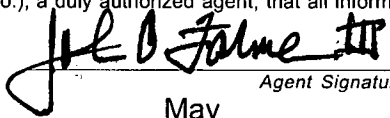
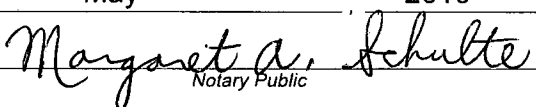


**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5  
August 2004  
Form must be Typed

Operator Name: <b>John O. Farmer, Inc.</b>		License Number: <b>5135</b>	
Operator Address: <b>P.O. Box 352, Russell, KS 67665</b>			
Contact Person: <b>Marge Schulte</b>		Phone Number: <b>( 785 ) 483 - 3145, Ext. 214</b>	
Permit Number (API No. if applicable): <b>15-167-23,625-00-00</b>		Lease Name: <b>Maupin 'B'</b>	
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: <b>#1</b>	
		Source Location (QQQQ): <b>NE - SE - SE - SW</b> Sec. <b>10</b> Twp. <b>11S</b> R. <b>15</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>430</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>2580</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>Russell</b> County	
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input checked="" type="checkbox"/> Other: <b>drilling mud</b>			
Amount of waste: <u>27</u> No. of loads <u>2160 total</u> Barrels    _____ Tons    _____ 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: <b>KCC approved haul-off pit</b>			
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>4-26-10</b>	
Operator Name: <b>John O. Farmer, Inc.</b>		License No.: <b>5135</b>	
Lease Name: <b>Maupin "B" Haul-Off Pit</b>		Sec. <b>2</b> Twp. <b>11S</b> R. <b>15</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No.:		County: <b>Russell</b>	

RECEIVED  
KANSAS CORPORATION COMMISSION  
  
MAY 11 2010  
  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that <u>he</u> / she is _____ <b>President</b>	
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.	
Subscribed and sworn to before me on this <u>10th</u> day of <u>May</u> 2010	 Agent Signature
My Commission Expires _____	 Notary Public

