

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

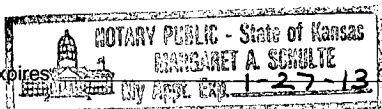
Operator Name: John O. Farmer, Inc.	License Number: 5135
Operator Address: P.O. Box 352, Russell, KS 67665	
Contact Person: Marge Schulte	Phone Number: (785) 483 - 3145, Ext. 214
Permit Number (API No. if applicable): 15-167-23,634-00-00	Lease Name: Maupin "C"
Source of Waste: <input type="checkbox"/> 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): S/2 - SW - NW - SE
	Sec. 10 Twp. 11S R. 15 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1535 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 2310 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Russell 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> 1 </u> No. of loads <u> 80 </u> Barrels _____ Tons _____ YDS	
Destination of waste: <input type="checkbox"/> Reserve Pit <input checked="" type="checkbox"/> Haul Off Pit <input 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: 8-31-10
Operator Name: John O. Farmer, Inc.	License No.: 5135
Lease Name: Maupin "B" #1 Haul-Off Pit	Sec. 32 Twp. 11S R. 15 <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.:	County: Russell
Comments:	

The undersigned hereby certifies that he she is President
 for John O. Farmer, 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 27th day of September 2010

John O. Farmer III
Agent Signature

Margaret A. Schulte
Notary Public



My Commission Expires

RECEIVED

SEP 28 2010