


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

RECEIVED

Operator Name: <b>FALCON EXPLORATION INC.</b>		License Number: <b>5316</b>	<b>NOV 04 2010</b>
Operator Address: <b>125 N. MARKET, SUITE 1252, WICHITA, KS 67202</b>		<b>KCC WICHITA</b>	
Contact Person: <b>MICHEAL S MITCHELL</b>		Phone Number: ( <b>316</b> ) <b>262 - 1378</b>	
Permit Number (API No. if applicable): <b>15-025-21516-0000</b>		Lease Name: <b>GRC</b>	
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Well Number: <b>3-11(NW)</b> Source Location (QQQQ): <u>SW</u> - <u>NE</u> - <u>NW</u> - <u>NW</u> Sec. <u>11</u> Twp. <u>31S</u> R. <u>22</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>510</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>810</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>CLARK</u> 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 <u>280</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>9/28&amp;9/30/2010</u>	
Operator Name: <u>SHAWN HAYDEN</u>		License No.: <u>33562</u>	
Lease Name: <u>LIZ SMITH</u>		Sec. <u>26</u> Twp. <u>30</u> R. <u>34</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D26802</u>		County: <u>HASKELL</u>	
Comments:			
The undersigned hereby certifies that he / she is <u>PRESIDENT</u> for <u>FALCON EXPLORATION INC.</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. _____ Agent Signature			
Subscribed and sworn to before me on this <u>3RD</u> day of <u>NOVEMBER</u> <u>2010</u>			
My Commission Expires: <u>9/28/11</u>		 <u>Rosann M Schippers</u> Notary Public	