

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

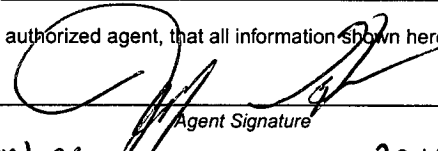
Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Castle Resources Inc.		License Number: 9860
Operator Address: PO Box 87 Schoenchen, KS 67667		
Contact Person: Jerry Green		Phone Number: (785) 625 - 5155
Permit Number (API No. if applicable): 15-05102151 0000		Lease Name: Hugh Cress
Source of Waste: <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		Well Number: 3 Source Location (QQQQ): <u> </u> - <u>NW-SE-NE</u> Sec. 13 Twp. 11 R. 17 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 3653 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1092 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Ellis 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>Fresh water</u>		
Amount of waste: <u>1</u> No. of loads <u>80</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: Operator Name: <u>V. Francis Weigel</u> Lease Name: <u>Mermis</u> Docket No./API No.: <u>22,305</u>		Date of Waste Transfer: <u>November 2009</u> License No.: <u>33996</u> Sec. <u>8</u> Twp. <u>13S</u> R. <u>15</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West County: <u>Ellis</u>
Comments:		

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The undersigned hereby certifies that he / she is PRESENT
for CASTLE RESOURCES INC (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
Katherine Bray
 Notary Public

Subscribed and sworn to before me on this 20th day of December, 2010

