

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Tim Splechter</b>		License Number: <b>32709</b>	
Operator Address: <b>1586 Hwy 54</b>			
Contact Person: <b>Tim Splechter</b>		Phone Number: ( <b>620</b> ) <b>496 - 6100</b>	
Permit Number (API No. if applicable): <b>15-207-27560 0600</b>		Lease Name: <b>Grisier</b>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number: <b>6-10</b>	
		Source Location (QQQQ): <u>  <b>nw</b>  </u> - <u>  <b>se</b>  </u> - <u>  <b>sw</b>  </u> - <u>  <b>sw</b>  </u> Sec. <u>  <b>8</b>  </u> Twp. <u>  <b>25</b>  </u> R. <u>  <b>16</b>  </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>  <b>525</b>  </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>  <b>810</b>  </u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>  <b>Woodson</b>  </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>  <b>100</b>  </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>  <b>11/10/2010</b>  </u>	
Operator Name: <u>  <b>Tim Splechter</b>  </u>		License No.: <u>  <b>32709</b>  </u>	
Lease Name: <u>  <b>Grisier</b>  </u>		Sec. <u>  <b>8</b>  </u> Twp. <u>  <b>25</b>  </u> R. <u>  <b>16</b>  </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>  <b>permit E30415 Grisier 1-06</b>  </u>		County: <u>  <b>Woodson</b>  </u>	
Comments:			

**RECEIVED**  
**DEC 30 2010**  
**KCC WICHITA**

The undersigned hereby certifies that he / she is <u>  <b>Owner / Operator</b>  </u> for <u>  <b>Tim Splechter</b>  </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>  <b>28th</b>  </u> day of <u>  <b>Dec</b>  </u> <u>  <b>2010</b>  </u>	
_____ Notary Public	
My Commission Expires: <u>  <b>6-24-11</b>  </u>	

**JOHN A. DANLER**  
Notary Public - State of Kansas  
My Appt. Expires   **6-24-11**