

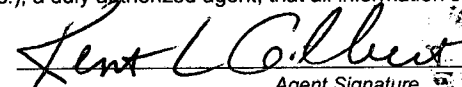
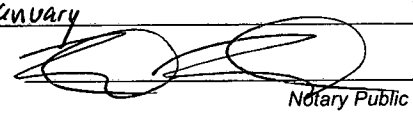
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Gilbert-Stewart Operating LLC</b>		License Number: <b>32924</b>
Operator Address: <b>Suite 450 1801 Broadway Denver, CO 80202</b>		
Contact Person: <b>Kent Gilbert</b>		Phone Number: ( <b>303</b> ) <b>534 - 1686</b>
Permit Number (API No. if applicable) <b>15159-22632-00-00</b>		Lease Name: <b>Lincoln</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>12</b>  Source Location (QQQQ): <u>NE</u> - <u>SE</u> - <u>SW</u> - _____ Sec. <u>6</u> Twp. <u>19S</u> R. <u>9</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>662</u> Feet from <input checked="" type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2843</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section _____ Rice _____ 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>240</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 checked="" type="checkbox"/> No		
Location of waste disposal:		Date of Waste Transfer: <u>12-20-10</u>
Operator Name: <u>Bob's Oil Service</u>		License No.: <u>32408</u>
Lease Name: <u>Sieker/Teichmann</u>		Sec. <u>35</u> Twp. <u>19</u> R. <u>11</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <u>26497/23722</u>		County: <u>Barton</u>
Comments:		

**RECEIVED**  
**JAN 31 2011**  
**KCC WICHITA**

The undersigned hereby certifies that he / she is <u>MANAGER</u> for <u>Gilbert Stewart Operating LLC</u> (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 <u>24<sup>th</sup></u> day of <u>January</u>	 Agent Signature
My Commission Expires: <u>10/26/2014</u>	 Notary Public