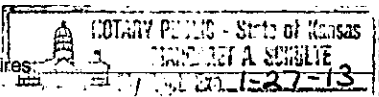


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form GDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>John O. Farmer, Inc.</u>		License Number: <u>5135</u>	
Operator Address: <u>P.O. Box 352, Russell, KS 67665</u>			
Contact Person: <u>Marge Schulte</u>		Phone Number: ( <u>785</u> ) <u>483</u> - <u>3145</u> , Ext. <u>214</u>	
Permit Number (API No. if applicable): <u>15-065-23,651 0000</u>		Lease Name: <u>Belleau</u>	
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: <u>#1</u>	
		Source Location (QQQQ): <u>NW</u> - <u>SE</u> - <u>SE</u> - <u>NE</u> Sec. <u>30</u> Twp. <u>7S</u> R. <u>21</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2015</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>520</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Graham</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: <u>1</u> No. of loads <u>50</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>9-23-10</u>	
Operator Name: <u>John O. Farmer, Inc.</u>		License No.: <u>5135</u>	
Lease Name: <u>White "A" #3 SWD</u>		Sec. <u>28</u> Twp. <u>9S</u> R. <u>22</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D-30,313</u>		County: <u>Graham</u>	
Comments:			
<p>The undersigned hereby certifies that <input checked="" type="radio"/> he <input type="radio"/> she is <u>President</u>          for <u>John O. Farmer, Inc.</u> (Co.), a duly authorized agent, that all information shown hereon is true          and correct to the best of <input checked="" type="radio"/> his <input type="radio"/> her knowledge and belief.</p> <p>Subscribed and sworn to before me on this <u>25th</u> day of <u>October</u>, <u>2010</u></p> <p style="text-align: center;">    <u>Margaret A. Schulte</u>          Notary Public       </p>			

RECEIVED

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

OCT 26 2010

KCC WICHITA