

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2004  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

07

Operator Name: <b>M &amp; M Exploration, Inc.</b>		License Number: <b>31885</b>
Operator Address: <b>60 Garden Center, Suite 102 Broomfield, CO 80020</b>		
Contact Person: <b>Mike Austin</b>		Phone Number: ( <b>303</b> ) <b>438 - 1991</b>
Permit Number (API No. if applicable): <b>15-007-23136</b> <del>XXXX</del>		Lease Name: <b>Z Bar</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>15-5</b>
		Source Location (QQQQ): <b>S/2 - SW - NW</b> Sec. <b>15</b> Twp. <b>34S</b> R. <b>15</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>2200</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>660</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>Barber</b> 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    _____ Barrels    _____ Tons    _____ YDS		
Destination of waste: <input type="checkbox"/> Reserve Pit <input 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: _____
Operator Name: <b>Not enough free fluids to haul off</b>		License No.: _____
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West
Docket No.: _____		County: _____

RECEIVED  
KANSAS CORPORATION COMMISSION  
  
**JUL 05 2007**  
  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is Michael N. Austin, President  
for M & M Exploration, Inc. (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 3rd day of July, 2007

My Commission Expires: January 13, 2009

*Michael N. Austin*  
Agent Signature

*Arlene Romero*  
Notary Public



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

My Commission Expires  
**JANUARY 13, 2009**