

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5  
August 2004  
Form must be Typed

67

Operator Name: <b>Dart Cherokee Basin Operating Co LLC</b>		License Number: <b>33074</b>
Operator Address: <b>211 W Myrtle, Independence, Ks. 67301</b>		
Contact Person: <b>Tony Williams</b>		Phone Number: ( <b>620</b> ) <b>331 - 7870</b>
Permit Number (API No. if applicable): <b>15-125-31380-00-00</b>		Lease Name: <b>N Groth et al</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>A2-24</b>
		Source Location (QQQQ): <u>      </u> - <b>NE</b> - <b>NE</b> - <b>NW</b>
		Sec. <b>24</b> Twp. <b>33S</b> R. <b>14</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
		<b>4900</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section
		<b>3220</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section
		<b>Montgomery</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 <b>220</b> Barrels    _____ Tons    _____ YDS		
Destination of waste: <input type="checkbox"/> Reserve 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: <b>7/30/07</b>
Operator Name: <b>Dart Cherokee Basin Operating Co. LLC.</b>		License No.: <b>33074</b>
Lease Name: <b>Reitz B4-35 SWD</b>		Sec. <b>35</b> Twp. <b>34S</b> R. <b>14</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
Docket No.: <b>D-28391</b>		County: <b>Montgomery</b>

The undersigned hereby certifies that he / she is **Safety & Environmental Manager**  
for **Dart Cherokee Basin Operating** (Co.), a duly authorized agent, that all information shown hereon is true  
and correct to the best of his / her knowledge and belief.

*Tony Williams*  
Agent Signature

Subscribed and sworn to before me on this **10th** day of **August**, **2007**

**JENNIFER CLINES**  
Notary Public - State of Kansas  
My Appt Expires **12-05-08**

*Jennifer Clines*  
Notary Public

**RECEIVED**  
KANSAS CORPORATION COMMISSION

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

**AUG 15 2007**

CONSERVATION DIVISION  
WICHITA, KS