

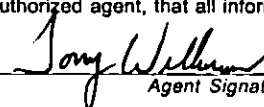
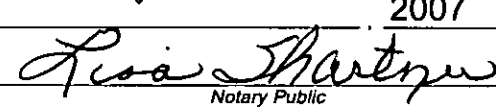
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5  
August 2004  
Form must be Typed

07

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>15-125-31323-00-00</b>		Lease Name: <b>D Davis-J &amp; D Davis Trust</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>A2-2</b> Source Location (QQQQ): _____ - <b>C</b> - <b>NE</b> - <b>NW</b> Sec. <b>2</b> Twp. <b>34S</b> R. <b>15</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>4620</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>3300</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>60</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>6/18/2007</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>	

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

The undersigned hereby certifies that he / she is <u><b>Sr. Regulatory &amp; Safety Compliance Specialist</b></u>	
for <u><b>Dart Cherokee Basin Operating</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.	
Subscribed and sworn to before me on this <u><b>3rd</b></u> day of <u><b>July</b></u> <u><b>2007</b></u>	 _____ Agent Signature
My Commission Expires: <u><b>5-26-07</b></u>	 _____ Notary Public

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

**LISA SHARTZER**  
Notary Public - State of Kansas  
My Appt. Expires **5-26-10**