

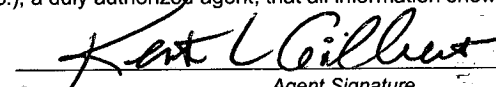
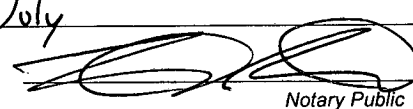
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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>15-159-22649-0000</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 checked="" 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: <b>#15</b> Source Location (QQQQ): <u>  <b>NW</b>  </u> - <u>  <b>NW</b>  </u> - <u>  <b>NW</b>  </u> - Sec. <u>  <b>22</b>  </u> Twp. <u>  <b>19</b>  </u> R. <u>  <b>9</b>  </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>  <b>340</b>  </u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>  <b>655</b>  </u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>  <b>Rice</b>  </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:      _____ No. of loads <u>  <b>465</b>  </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>  <b>6-14,15,23,28 7-6,8 2011</b>  </u>
Operator Name: <u>  <b>Bob's Oil Service</b>  </u>		License No.: <u>  <b>32408</b>  </u>
Lease Name: <u>  <b>Sieker Disposal</b>  </u>		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: <u>  <b>26497</b>  </u>		County: <u>  <b>Barton</b>  </u>
Comments:		

KANSAS CORPORATION COMMISSION  
**JUL 28 2011**  
**RECEIVED**

The undersigned hereby certifies that he / <del>she</del> <u>  <b>MANAGER</b>  </u>	
for <u>  <b>Gilbert-Stewart Oper</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>26th</b>  </u> day of <u>  <b>July</b>  </u> , <u>  <b>2011</b>  </u>	 Agent Signature
My Commission Expires: <u>  <b>10/26/2014</b>  </u>	 Notary Public