


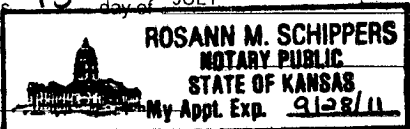
KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: FALCON EXPLORATION INC.		License Number: 5316	
Operator Address: 125 N. MARKET, SUITE 1252, WICHITA, KS 67202			
Contact Person: MICHEAL S MITCHELL		Phone Number: (316) 262 - 1378	
Permit Number (API No. if applicable): 15-069-20336-0000		Lease Name: DAVIS	
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 type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input checked="" type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number: 1-33(SW)	
		Source Location (QQQQ): <u>SW</u> <u>SE</u> <u>SE</u> <u>SW</u> Sec. <u>33</u> Twp. <u>27</u> R. <u>30</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>200</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2190</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>GRAY</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>80</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>02/17/2011</u>	
Operator Name: <u>SHAWN HAYDEN</u>		License No.: <u>33562</u>	
Lease Name: <u>LIZ SMITH</u>		Sec. <u>26</u> Twp. <u>30</u> R. <u>34</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D26802</u>		County: <u>HASKELL</u>	
Comments:			

RECEIVED
JUL 14 2011
KCC WICHITA

The undersigned hereby certifies that he / she is <u>PRESIDENT</u>	
for <u>FALCON EXPLORATION INC.</u> (Co.), a duly authorized agent, that all information shown hereon is true	
and correct to the best of his / her knowledge and belief.	
 _____ Agent Signature	
Subscribed and sworn to before me on this <u>13th</u> day of <u>JULY</u> , 2011	
My Commission Expires: <u>9/28/11</u>	 _____ Notary Public