

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>EnerJex Kansas, Inc.</u>		License Number: <u>33741</u>	
Operator Address: <u>27 Corporate Woods, Suite 350 10975 Grandview Dr. Overland Park, KS 66210</u>			
Contact Person: <u>Marcia Littell</u>		Phone Number: (<u>913</u>) <u>754</u> - <u>7740</u>	
Permit Number (API No. if applicable): <u>15-045-20397-00-01</u>		Lease Name: <u>Thoren</u>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input checked="" 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 type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number: <u>11</u>	
		Source Location (QQQQ): <u>NE</u> - <u>NW</u> - <u>NE</u> - <u>SE</u> Sec. <u>6</u> Twp. <u>14</u> R. <u>21</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>2365</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>900</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Douglas</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>35</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input checked="" type="checkbox"/> Other: <u>E-28,076</u>			
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>04/21/2010</u>	
Operator Name: <u>EnerJex Kansas, Inc.</u>		License No.: <u>33741</u>	
Lease Name: <u>Thoren</u>		Sec. <u>6</u> Twp. <u>14</u> R. <u>21</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>E-28,076/15-045-20397-00-01</u>		County: <u>Douglas</u>	
Comments:			

RECEIVED

The undersigned hereby certifies that he / she is Compliance Coordinator
for EnerJex Kansas, Inc. (Co.), a duly authorized agent, that all information shown hereon is true

APR 08 2011

and correct to the best of his / her knowledge and belief.

Marcia Littell
Agent Signature

KCC WICHITA

Subscribed and sworn to before me on this 5th day of APRIL, 2011

Nancy M. Garrison
Notary Public

My Commission Expires: 9/2/2012



NOTARY PUBLIC-STATE OF KANSAS
NANCY M. GARRISON
MY COMMISSION EXPIRES 9/2/2012