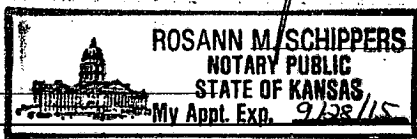


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

15-069-20338-0000

Operator Name: FALCON EXPLORATION INC.		License Number: 5316	
Operator Address: 125 N. MARKET, SUITE 1252, WICHITA, KS 67202			
Contact Person: CYNDE WOLF		Phone Number: (316) 262 - 1378	
Permit Number (API No. if applicable): 15-069-20338-0000		Lease Name: ROBERT JOSSERAND	
Source of Waste:		Well Number: 1-5(SE)	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Haul-off Pit <input checked="" type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u>NE</u> <u>SW</u> <u>SE</u> <u>SE</u> Sec. <u>5</u> Twp. <u>28S</u> R. <u>30</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>380</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>850</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>GRAY</u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: <u>NONE</u>			
Amount of waste: _____ No. of loads _____ 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 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>NONE</u>	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: _____	
Comments: 			
The undersigned hereby certifies that he / she is <u>VICE-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.			
Subscribed and sworn to before me on this _____ 17TH day of _____ NOVEMBER 2011		Agent Signature _____	
My Commission Expires: <u>9/28/15</u>		 <u>Rosann M Schippers</u> Notary Public	

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

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