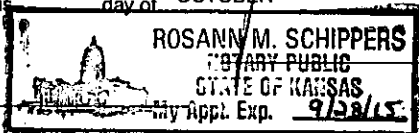


15-025-21418-0000

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <b>FALCON EXPLORATION INC.</b>		License Number: <b>5316</b>	
Operator Address: <b>125 N. MARKET, SUITE 1252, WICHITA, KS 67202</b>			
Contact Person: <b>CYNDE WOLF</b>		Phone Number: ( <b>316</b> ) <b>262 - 1378</b>	
Permit Number (API No. if applicable): <b>15-025-21418-0000</b>		Lease Name: <b>FULTON</b>	
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: <b>1-11(NE)</b>	
		Source Location (QQQQ): <b>S2 - NW - SW - NE</b> Sec. <b>11</b> Twp. <b>31</b> R. <b>22</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>1660</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>2310</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>CLARK</b> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
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 type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <b>NONE</b>	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: _____	
Comments:			
<p>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.</p> <p style="text-align: right;">_____ Agent Signature</p> <p>Subscribed and sworn to before me on this <u>31ST</u> day of <u>OCTOBER</u> 20<u>11</u></p> <p>My Commission Expires: <u>9/28/15</u></p> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 1px solid black; padding: 5px; text-align: center;">  </div> <div style="text-align: right;"> <p><i>Rosann M Schippers</i> _____ Notary Public</p> </div> </div>			

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

NOV 02 2011

KCC WICHITA