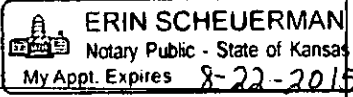
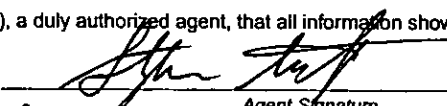
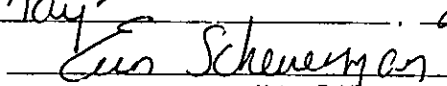


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <b>Stephan Tufte</b>		License Number: <b>34669</b>	
Operator Address: <b>7531 US 59 Hwy, Oskaloosa, KS 66066</b>			
Contact Person: <b>Stephan Tufte</b>		Phone Number: ( <b>785</b> ) <b>231 - 8090</b>	
Permit Number (API No. if applicable): <b>15-103-21345-00-00</b>		Lease Name: <b>Blaker</b>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Dike <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Well Number: <b>No.2</b> Source Location (QQQQ): <u>  <b>nw</b>  - <b>nw</b>  - <b>sw</b>  - <b>sw</b>  </u> Sec. <u>  <b>24</b>  </u> Twp. <u>  <b>12</b>  </u> R. <u>  <b>20</b>  </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>  <b>825</b>  </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>  <b>5115</b>  </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>  <b>Leavenworth</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>20</b>  </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>  <b>air dried &amp; backfilled</b>  </u>			
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: _____	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: _____	
Comments: <p style="text-align: center;"><b>Water was consumed in drilling. Small remaining balance was air dried</b></p> <div style="text-align: right; font-weight: bold; font-size: 1.2em;">             RECEIVED              MAY 09 2012              KCC WICHITA           </div> <div style="text-align: right; border: 1px solid black; padding: 5px; margin-top: 10px;">  <p>ERIN SCHEUERMAN Notary Public - State of Kansas My Appt. Expires <u>  <b>8-22-2015</b>  </u></p> </div>			
The undersigned hereby certifies that he / she is <u>  <b>Agent</b>  </u> for <u>  <b>Stephan Tufte</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>7<sup>th</sup></b>  </u> day of <u>  <b>May</b>  </u> , <u>  <b>2012</b>  </u> <div style="text-align: right; margin-right: 100px;">           _____          Agent Signature       </div> <div style="text-align: right; margin-right: 100px;">           _____          Notary Public       </div>			
My Commission Expires: <u>  <b>August 22, 2015</b>  </u>			