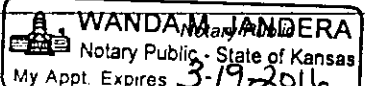


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>The Dane G. Hansen Trust</u>		License Number: <u>5285</u>	
Operator Address: <u>P.O. Box 187 Logan, Kansas 67646</u>			
Contact Person: <u>Richard L. Wallgren, Sr.</u>		Phone Number: (<u>785</u>) <u>689 - 4816</u>	
Permit Number (API No. if applicable): <u>15-051-261640000</u>		Lease Name: <u>Dinkel</u>	
Source of Waste:		Well Number: <u>#11</u>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u>NW - NE - SW - NE</u> Sec. <u>3</u> Twp. <u>14s</u> R. <u>20w</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1361'</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1721'</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Ellis</u> County	
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input checked="" type="checkbox"/> Other: <u>Saltwater</u>			
Amount of waste: _____ No. of loads <u>160</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>4-12-12</u>	
Operator Name: <u>The Dane G. Hansen Trust</u>		License No.: <u>5285</u>	
Lease Name: <u>Giebler #10 SWD</u>		Sec. <u>3</u> Twp. <u>14</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D-28,197</u>		County: <u>Ellis</u>	
Comments:			
<p>The undersigned hereby certifies that he / she is <u>Production Superintendent</u> for <u>The Dane G. Hansen Trust</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>Subscribed and sworn to before me on this <u>23rd</u> day of <u>April</u>, <u>2012</u></p> <p>My Commission Expires: <u>March 19, 2016</u></p>			
		<div style="border: 1px solid black; padding: 2px; display: inline-block;">  </div>	
		<p>RECEIVED APR 24 2012</p>	