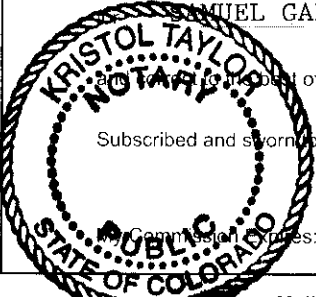
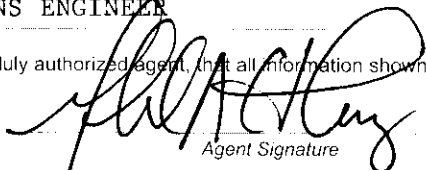



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: SAMUEL GARY JR. & ASSOCIATES, INC.		License Number: 3882	
Operator Address: 1515 WYNKOOP ST, STE 700 DENVER, CO 80202			
Contact Person: GABE D'ARTHENAY		Phone Number: (303) 831 -4673	
Permit Number (API No. if applicable): 15-159-22621-0000		Lease Name: WELLS TRUST	
Source of Waste:		Well Number: 1-6	
<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 type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): SE SW ^{NE/2} NE SW Sec. 6 Twp. 21S R. 10 East <input type="checkbox"/> West <input checked="" type="checkbox"/> 1250 3517 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1890 2 719 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section RICE 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: 4 No. of loads 320 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: 9/7/2010	
Operator Name: BRACKEEN LINE CLEANING, INC.		License No.: 9952	
Lease Name: PRAEGER SWD		Sec. 27 Twp. 17 R. 11 East <input type="checkbox"/> West <input checked="" type="checkbox"/>	
Docket No./API No.: D-20704		County: RICE	
Comments:			
The undersigned hereby certifies that he / she is OPERATIONS ENGINEER SAMUEL GARY JR. & ASSOC., INC (Co.), a duly authorized agent, that all information shown hereon is true and true to the best of his / her knowledge and belief. Subscribed and sworn to before me on this _____ day of _____ My Commission Expires: _____			
		 Agent Signature	
		 Notary Public	

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

My Commission Expires 08/11/2013

RECEIVED
NOV 22 2010
KCC WICHITA