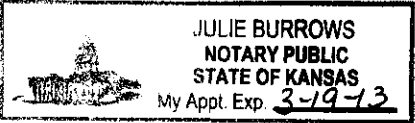
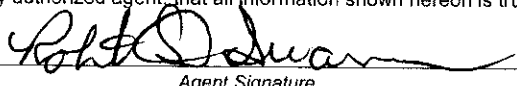



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: IA Operating, Inc		License Number: 33335	
Operator Address: 9915 W 21st, Ste B			
Contact Person: Robert Swann		Phone Number: (316) 721 - 0036	
Permit Number (API No. if applicable): 15-051-26007-00-00		Lease Name: A & E Zimmerma	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input checked="" 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: 12-1	
		Source Location (QQQQ): _____ - <u>NW</u> - <u>NE</u> - <u>SE</u>	
		Sec. <u>12</u> Twp. <u>14</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
		<u>2170</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1000</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Ellis _____ 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: <u>0</u> No. of loads <u>0</u> Barrels <u>0</u> Tons <u>0</u> 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: _____	
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; font-size: 1.2em;">There is no free fluid to dispose.</p>			
			
The undersigned hereby certifies that he / she is <u>Vice President</u> for <u>IA Operating, 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.			
		 Agent Signature	
Subscribed and sworn to before me on this <u>20</u> day of <u>January</u> , <u>2011</u>			
		 Notary Public	
My Commission Expires: <u>march 19, 2013</u>			

RECEIVED
JAN 24 2011