

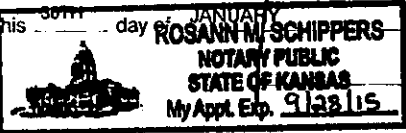
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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>JASON MITCHELL</b>		Phone Number: <b>( 316 ) 262 - 1378</b>
Permit Number (API No. if applicable): <b>15-069-20402-0000</b>		Lease Name: <b>WARD</b>
Source of Waste:		Well Number: <b>1-31(SE)</b>
<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): <b>NE - NE - NE - SW</b> Sec. <b>31</b> Twp. <b>28</b> R. <b>30</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>2500</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>2560</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>GRAY</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:		

**RECEIVED**  
**FEB 05 2013**  
**KCC WICHITA**

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.	
	Agent Signature
Subscribed and sworn to before me on this _____ day of <u>JANUARY</u> , 2013	
	 Rosann M. Schippers Notary Public
My Commission Expires: <u>9/28/15</u>	