

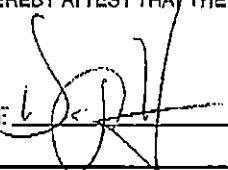
RECEIVED
KANSAS CORPORATION COMMISSION

MAY 07 2014

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONCONSERVATION DIVISION
WICHITA, KS

EXPLORATION & PRODUCTION WASTE TRANSFER

Form CDP-5
May 2011
Form must be Typed

Operator Name: Hewitt Energy Group Inc		License Number: 33830	
Operator Address: 175 S Maint St Suite 900 Salt Lake City UT 84111			
Contact Person: Doug Hewitt Jr		Phone Number: (801) 519 - 8500	
Permit Number (API No. if applicable): 15-191-21531- 0001		Lease Name: Yearout	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input checked="" 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 <input type="checkbox"/> Dike		Well Number: 1 Source Location (QQQQ): N2 - N2 - SE - SE Sec. 2 Twp. 35 R. 1 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 3120 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 4950 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section GPS Location: Lat: _____, Long: _____ (e.g. xx.xxxxx) (e.g. -xxx.xxxxx) Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84 County: Sumner	
No Waste to be Hauled: <input checked="" type="checkbox"/> (If checked, provide an explanation as to why no waste was hauled in the Comments area.)			
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: Destination Out of State: <input type="checkbox"/> (If checked, provide the location of where the waste was hauled in the Comments area.) 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: Waited for mud to dry. Backfilled the pit			
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. Date: 5/7/14 Signature:  Title: _____			