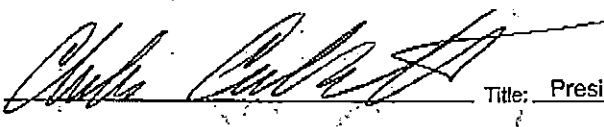


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form GDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Culbreath Oil & Gas Company, Inc.</u>		License Number: <u>34344</u>	
Operator Address: <u>1502 S. Peoria Avenue, Tulsa, Oklahoma</u>			
Contact Person: <u>Billy Schmidt</u>		Phone Number: (<u>918</u>) <u>749</u> - <u>3508</u>	
Permit Number (API No. if applicable): <u>15-179-20963-00-01</u>		Lease Name: <u>Minium</u>	
Source of Waste:		Well Number: <u>1-4 OWWO</u>	
<input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" 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		Source Location (QQQQ): <u>E2</u> - <u>NE</u> - <u>NW</u> - <u>SW</u> Sec. <u>4</u> Twp. <u>9</u> R. <u>26</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2310</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1040</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section GPS Location: Lat: _____ Long: _____ <small>(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)</small> Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84 County: <u>Sheridan</u>	
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.)			
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: _____	
Comments: No drilling fluid was removed from the site, the solids in the mud were allowed to settle, fluids were allowed to evaporate, solids dry and the pit was pushed back in with a dozer and the area was returned to original elevation			
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.			
Date: <u>6/20/2014</u>		Signature:  Title: <u>President</u>	

ATTN: PATTY MURRAY 316-337-6106