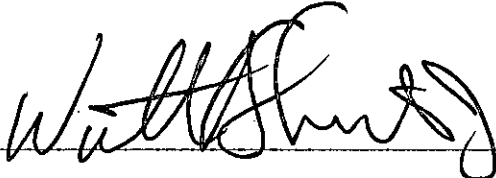
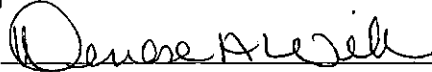


KANSAS CORPORATION COMMISSION  
 OIL & GAS CONSERVATION DIVISION  
**SURFACE POND WASTE TRANSFER**

Form GDP-5  
 August 2003  
 Form must be Typed

Operator Name: <u>W. D. Short Oil Company</u>		License Number: <u>6679</u>	
Operator Address: <u>PO Box 1 Oxford KS 67119-0001</u>			
Contact Person: <u>Don Short</u>		Phone Number: ( <u>620</u> ) <u>455 - 3576</u>	
Permit Number (API No. if applicable): <u>15-035-222870001</u>		Lease Name: <u>Short/Nelson A-2</u>	
Type of Pond: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Treatment Pit <input checked="" type="checkbox"/> <del>Workover Pit</del> <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit		Pit Location: Sec. <u>20</u> Twp. <u>33</u> S. R. <u>3</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>3960</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>660</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Cowley</u> County	
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Mud / Cuttings			
Amount of waste: _____ No. of loads      _____ Barrels			
Destination of waste: <input type="checkbox"/> Reserve Pit <input checked="" type="checkbox"/> Disposal Well			
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Location of waste disposal: Operator Name: <u>W. D. Short Oil Company</u> License No. <u>6679</u> Lease Name: <u>NELSON</u> Sec. <u>20</u> Twp. <u>33</u> S. R. <u>3</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West Docket No. <u>E 02799</u> County: <u>Cowley</u>			
 _____ 4-23-04		RECEIVED APR 27 2004 KCC WICHITA	
The undersigned hereby certifies that he / she is <u>Gen Mgr</u> for <u>W. D. SHORT</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. Subscribed and sworn to before me on this <u>23</u> day of <u>April</u> , <u>2004</u> <div style="text-align: right;">                       _____                      Notary Public                 </div> My Commission Expires: <u>3-13-05</u>			

**DENESE A. WILSON**  
 Notary Public - State of Kansas  
 My Appt. Expires 3-13-05

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