

Kansas Corporation Commission Oil & Gas Conservation Division

167722

Form CDP-5 May 2011 Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name:	License Number:	
Operator Address:		
Contact Person:	Phone Number: () -	
Permit Number (API No. if applicable):	Lease Name:	
Source of Waste:	Well Number:	
Emergency Pit Settling Pit Workover Pit Drilling Pit Burn Pit Haul-off Pit Steel Pit Spill / Escape Dike	Source Location (QQQQ):	
No Waste to be Hauled: (If checked, provide an explanation as to why no waste was hauled in the Comments area.)		
Type of waste to be disposed:		
Amount of waste: No. of loads Barrels	Tons YDS	
Destination of waste: Reserve Pit Haul Off Pit Disposal Well Lease Road Dike / Berm Other:		
If waste is transferred to another reserve pit, is the lease active?		
Location of Waste Disposal: Destination Out of State: (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 East West	
Docket No./API No.:	County:	
Comments:		
Submitted Electronically		

Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-4 April 2004 Form must be Typed

CLOSURE OF SURFACE PIT

Operator Name: O'Brien Resources, LLC	License Number: 33806	
Operator Address: P.O. Box 6149, Shreveport, LA 71136		
Contact Person: Harold Bellerive	Phone Number: (785) 635 - 4531	
Permit Number (API No. if applicable): 15-193-20771-0000	Lease Name & Well No.: Barnett #7-1	
Type of Pit:	Pit Location (QQQQ):	
Emergency Pit Burn Pit Settling Pit ✓ Drilling Pit Workover Pit Haul-Off Pit	Sec. 07 Twp. 10S R. 32 East West 791 Feet from North / South Line of Section 1617 Feet from East / West Line of Section Thomas County	
Date of closure:		
Was an artificial liner used? ☐ Yes ✓ No		
If no, how were the sides and bottom sealed to prevent downward migration of the pit contents? Drilling mud and natural soil beds Abandonment procedure of pit: Evaporation of fluids. Test beds for moisture. Cover as needed		
The undersigned hereby certifies that he / she is		
Subscribed and sworn to me on this 10^{+h} day of My Commission Expires: $9-29-12$	Notary Public NOTARY PUBLIC - State of Kansas JILL R BLACKWILL My Appt. Expires	