



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: <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 type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape <input type="checkbox"/> Dike | Well Number: Source Location (QQQQ): _____ - _____ - _____ - _____ Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West _____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section _____ Feet from <input type="checkbox"/> East / <input 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: _____ |

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: Fluid Soil Mud / Cuttings Other: _____

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? Yes No

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

JUL 21 2010

2322

Due in 30 days

HAYS RCVD.
JUL 19 2010



1218 MacArthur Rd • Hays, KS 67601
785-639-1595

HAYS RCVD.
JUL 27 2010

JUL 28 2010

INVOICE

| | |
|-----------------------------------|------------------|
| CUSTOMER Beckxco Inc | LEASE Wolf #5 |
| ADDRESS PO Box 723 | OK mat |
| CITY, STATE, ZIP Hays KS 67601 | |

| DATE | # OF TRUCKS | DESCRIPTION | PRICE | UNIT | AMOUNT |
|---------|-------------|--|-------|------|---------|
| 7-12-10 | 1 | Haul free water off reserve pit 2 loads | 85.00 | 2.5 | 212.50 |
| 7-13-10 | 1 | Haul free water off reserve pit 6 loads | 85.00 | 7.5 | 637.50 |
| 7-14-10 | 1 | Haul free water off reserve pit 4 loads | 85.00 | 4.5 | 382.50 |
| 7-15-10 | 1 | Haul free water off reserve pit 5 loads | 85.00 | 6.0 | 510.00 |
| | | TO Wolf #2 | | | |
| Total | | | | | 1742.50 |

333 GL DATE: 100731
 GLMAJR: 2106 GLMINR: 1015
 A/C: _____ ENTITY: 7163003
 VIP # 14180 CBY /mm RBY _____
 DESC: _____

