



KANSAS CORPORATION COMMISSION 1026894
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Oil Producers Inc. of Kansas		License Number: 8061	
Operator Address: 1710 WATERFRONT PKWY WICHITA KS 67206 6603			
Contact Person: Lori Zehr		Phone Number: (316) 681 - 0231	
Permit Number (API No. if applicable): 15-175-22160-00-00		Lease Name: Fawcett	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number: 1-33	
		Source Location (QQQQ): _____ - _____ - NE - NW	
		Sec. <u>33</u> Twp. <u>32</u> R. <u>32</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>4620</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>3300</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Seward</u> County	
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u>1</u> No. of loads <u>151</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input checked="" 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:		Date of Waste Transfer: <u>10/24/2008</u>	
Operator Name: <u>H & L Disposal Wells, Inc.</u>		License No.: <u>15484</u>	
Lease Name: <u>Anna Bryant#2</u>		Sec. <u>19</u> Twp. <u>2</u> R. <u>21</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: <u>Beaver County Oklahoma</u>	
Comments:			
<p>Submitted Electronically</p> <p style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5; position: absolute; right: 0; bottom: 0;">RWD 7-9-09</p>			