

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Lachenmayr Oil LLC.</u>		License Number: <u>6804</u>	
Operator Address: <u>P.O. Box 526</u>			
Contact Person: <u>John Lachenmayr</u>		Phone Number: ( <u>316</u> ) <u>283</u> - <u>5585</u>	
Permit Number (API No. if applicable): <sup>15</sup> <u>173-20996-0000</u>		Lease Name: <u>Wilson</u>	
Source of Waste:		Well Number: <u>4</u>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input 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		Source Location (QQQQ): <u>W/2</u> - <u>W/2</u> - <u>SE</u> - _____ Sec. <u>12</u> Twp. <u>26S</u> R. <u>1</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1320</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2210</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Sedgwick</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>4</u> No. of loads    _____ 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>11/03/08</u>	
Operator Name: <u>Lachenmayr Oil LLC.</u>		License No.: <u>6804</u>	
Lease Name: <u>Shawver</u>		Sec. <u>7</u> Twp. <u>26S</u> R. <u>1</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>25-985</u>		County: <u>Sedgwick</u>	
Comments:			

RECEIVED  
KANSAS CORPORATION COMMISSION  
  
JAN 26 2009  
  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is Manager  
for Lachenmayr Oil LLC (Co.) and 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 20th day of January, 2009  
My Commission Expires: 10-11-10

John Lach  
Agent Signature  
  
Barbara L. Brown  
Notary Public

**BARBARA L. BROWN**  
Notary Public - State of Kansas  
67202y Appt. Expires Oct. 11, 2010