



KANSAS CORPORATION COMMISSION 1029490
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: O'Brien Energy Resources Corp.		License Number: 32211	
Operator Address: 18 CONGRESS ST, STE 207 PORTSMOUTH NH 03801 4091			
Contact Person: JOSEPH FORMA		Phone Number: (603) 427 - 2099	
Permit Number (API No. if applicable): 15-119-21211-0000		Lease Name: BORCHERS	
Source of Waste:		Well Number: 2-34	
<input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling 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> N2 </u> - <u> SE </u> - <u> SE </u> - <u> SW </u> Sec. <u> 34 </u> Twp. <u> 32 </u> R. <u> 29 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 610 </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u> 2970 </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u> Meade </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: _____ No. of loads <u> 250 </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> 8/21/2008 </u>	
Operator Name: <u> Dill, Gene R. </u>		License No.: <u> 9491 </u>	
Lease Name: <u> FELDMAN </u>		Sec. <u> 18 </u> Twp. <u> 34 </u> R. <u> 28 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u> D23094 </u>		County: <u> MEADE </u>	
Comments:			
Submitted Electronically		RECEIVED JUL 08 2009 KCC WICHITA	