

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Lachenmayr Oil LLC.</b>		License Number: <b>6804</b>	
Operator Address: <b>P.O. Box 526</b>			
Contact Person: <b>John Lachenmayr</b>		Phone Number: ( <b>316</b> ) <b>283 - 5585</b>	
Permit Number (API No. if applicable): <sup>15</sup> <b>173-20684-00-01</b>		Lease Name: <b>Newton</b>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input checked="" 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: <b>1</b>	
		Source Location (QQQQ): <b>NE - SW - NE -</b> Sec. <b>12</b> Twp. <b>26S</b> R. <b>1</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>1850</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>1650</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Sedgwick</b> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u>2</u> No. of loads    _____ Barrels    _____ Tons    _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input checked="" type="checkbox"/> Other: <u>Land owners pond</u>			
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>10/10/08</u>	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. <u>12</u> Twp. <u>26S</u> R. <u>1</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: _____		County: <u>Sedgwick</u>	
Comments: <p style="text-align: center;"><b>Landowner wanted to seal up bottom of pond.</b></p>			
RECEIVED KANSAS CORPORATION COMMISSION  <b>JAN 21 2009</b>  CONSERVATION DIVISION WICHITA, KS			
The undersigned hereby certifies that he / she is <u>Manager</u> for <u>Lachenmayr Oil LLC</u> (Co.) a duly 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 <u>20th</u> day of <u>Jan</u>		<u>John Lachenmayr</u> Agent Signature	
My Commission Expires: _____		<u>Barbara L. Brown</u> Notary Public	
My Appt. Expires <b>Oct. 11, 2010</b>			