

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <b>B-C Steel, LLC.</b>		License Number: <b>33711</b>
Operator Address: <b>2435 to 2445</b>		
Contact Person: <b>Bert Carlson</b>		Phone Number: ( <b>620</b> ) <b>625 - 2999</b>
Permit Number (API No. if applicable): <b>15035 243 220 000</b>		Lease Name: <b>Davis</b>
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: <b>2</b>
		Source Location (QQQQ): <b>NW - SW - NE - SE</b> Sec. <b>10</b> Twp. <b>32S</b> R. <b>7</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>4000</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>700</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Cowley</b> County

Type of waste to be disposed:  Fluid     Soil     Mud / Cuttings     Other: \_\_\_\_\_

Amount of waste: 1 No. of loads    20 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: \_\_\_\_\_ Date of Waste Transfer: **12/10/08**

Operator Name: **B-C Steel, LLC.** License No.: **33711**

Lease Name: **Beamer** Sec. **10** Twp. **32S** R. **7**  East  West

Docket No./API No.: **E-06951** County: **Cowley**

Comments: \_\_\_\_\_

RECEIVED  
KANSAS CORPORATION COMMISSION

FEB 17 2009

CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is AREA MANAGER  
for TEAM RESOURCES (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 13 day of Feb, 2009

My Commission Expires: 2-28-09

*W. Roger Johnson*  
Agent Signature

*Carlton Hopper*  
Notary Public

