

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: B-C Steel, LLC.		License Number: 33711	
Operator Address: 2435 to 2445			
Contact Person: Bert Carlson		Phone Number: (620) 625 - 2999	
Permit Number (API No. if applicable): <u>15035243226000</u>		Lease Name: Davis	
Source of Waste:		Well Number: 2	
<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>NW</u> - <u>SW</u> - <u>NE</u> - <u>SE</u> Sec. <u>10</u> Twp. <u>32S</u> R. <u>7</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>4000</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>700</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Cowley</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>8</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>2/10/09</u>	
Operator Name: <u>B-C Steel, LLC.</u>		License No.: <u>33711</u>	
Lease Name: <u>Beamer</u>		Sec. <u>10</u> Twp. <u>32S</u> R. <u>7</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>E-06951</u>		County: <u>Cowley</u>	
Comments:			

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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 Hopper
Agent Signature

Carlton Hopper
Notary Public

