

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>15035243150000</b>		Lease Name: <b>Barger</b>	
Source of Waste: <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		Well Number: <b>4</b>	
		Source Location (QQQQ): <u>ctr</u> - <u>E2</u> - <u>SE</u> - <u>SE</u> Sec. <u>3</u> Twp. <u>32S</u> R. <u>7</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>4620</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>330</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>18</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>11/28/08</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:			

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

