

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5
August 2004
Form must be Typed

Operator Name: <u>Town Oil Company, Inc.</u>		License Number: <u>6142</u>	
Operator Address: <u>16205 W. 287th St. Paola, Kansas 66071</u>			
Contact Person: <u>Roberta Town</u>		Phone Number: (<u>913</u>) <u>294-2125</u>	
Permit Number (API No. if applicable): <u>15-045-21,368-00-00</u>		Lease Name: <u>Bell (Baldwin Unit)</u>	
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: <u>F-4</u> Source Location (QQQQ): <u>SW - NE - SW - SW</u> Sec. <u>1</u> Twp. <u>15</u> R. <u>20</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>825</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>4420</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Douglas</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>20</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve 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 checked="" type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u>12-27-08</u>	
Operator Name: <u>Town Oil Company, Inc.</u>		License No.: <u>6142</u>	
Lease Name: <u>Dorsey S-1</u>		Sec. <u>10</u> Twp. <u>16</u> R. <u>21</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No.: <u>D-26,829</u>		County: <u>Franklin</u>	

The undersigned hereby certifies that he / she is Roberta Town
 for Town Oil Company, Inc. (Co.), a duly authorized agent, that all information shown hereon is true
 and correct to the best of his / her knowledge and belief. Roberta Town
 Agent Signature

Subscribed and sworn to before me on this 27th day of January, 2009
Jacquelyn Cheek
 Notary Public

My Commission Expires: 9-12-09