

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Chieftain Oil Co., Inc.</b>		License Number: <b>33235</b>
Operator Address: <b>605 S. 6th; PO Box 124 KIOWA KS 67070 1912</b>		
Contact Person: <b>Ron Molz</b>		Phone Number: ( <b>620</b> ) <b>825 - 4030</b>
Permit Number (API No. if applicable): <b>15-007-23417-00-00</b>		Lease Name: <b>Rowe A</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>1</b>  Source Location (QQQQ): <u>  <b>NW</b>  </u> <u>  <b>NE</b>  </u> <u>  <b>NE</b>  </u> <u>  <b>SW</b>  </u> Sec. <u>  <b>4</b>  </u> Twp. <u>  <b>32</b>  </u> R. <u>  <b>10</b>  </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>  <b>2416</b>  </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>  <b>2085</b>  </u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>  <b>Barber</b>  </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>  <b>10</b>  </u> No. of loads <u>  <b>1000</b>  </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>  <b>01-31-2009</b>  </u>
Operator Name: <u>  <b>Molz Oil Company</b>  </u>		License No.: <u>  <b>6006</b>  </u>
Lease Name: <u>  <b>GARNER ZAPPIA</b>  </u>		Sec. <u>  <b>11</b>  </u> Twp. <u>  <b>33</b>  </u> R. <u>  <b>10</b>  </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <u>  <b>15-007-00572-0001</b>  </u> <u>  <b>D280600</b>  </u>		County: <u>  <b>Barber</b>  </u>
Dp n n t out ;		
<p><i>Fluid</i> <i>7-14-09</i></p>		
<p>Tvcn juf e!F rhduspojdbrrn</p>		