

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form GDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Chieftain Oil Co., Inc		License Number: 33235	
Operator Address: P.O. Box 124 Kiowa, KS 67070			
Contact Person: Ron Molz		Phone Number: (620) 825 - 4030	
Permit Number (API No. if applicable): 15-007-23362-0000		Lease Name: Christensen	
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>SW</u> - <u>NE</u> - <u>NW</u> - <u>SE</u> Sec. <u>24</u> Twp. <u>34</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2230</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1850</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Barber</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>10</u> No. of loads <u>1000</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 checked="" type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u>9/26/2008</u>	
Operator Name: <u>Molz Oil Co., Inc</u>		License No.: <u>6006</u>	
Lease Name: <u>Garner SWD</u>		Sec. <u>11</u> Twp. <u>33</u> R. <u>10</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D28660,0</u>		County: <u>Barber</u>	
Comments:			
RECEIVED KANSAS CORPORATION COMMISSION OCT 14 2008 CONSERVATION DIVISION WICHITA, KS			
The undersigned hereby certifies that he / she is <u>Secretary</u> for <u>Chieftain Oil Co., Inc.</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. <u>Justin L. May</u> Agent Signature			
Subscribed and sworn to before me on this <u>10</u> day of <u>October</u> , <u>2008</u> . <u>Amanda Corr</u> Notary Public			
My Commission Expires: <u>4-11-2011</u> NOTARY PUBLIC - State of Kansas AMANDA CORR My Appt. Expires <u>4/11/11</u>			