

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Heartland Oil &amp; Gas Corporation</b>		License Number: <b>33233</b>	
Operator Address: <b>14615 W. 343rd, Paola, KS 66071</b>			
Contact Person: <b>Susie Glaze</b>		Phone Number: ( <b>913</b> ) <b>849</b> - <b>3322</b>	
Permit Number (API No. if applicable): <b>15-121-28495-0000</b>		Lease Name: <b>Menefee</b>	
Source of Waste:		Well Number: <b>22-2</b>	
<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): <b>SE . SE . NW .</b> Sec. <b>02</b> Twp. <b>18S</b> R. <b>24</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>2030</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>2229</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>MIAMI</b> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste:    _____ No. of loads    _____ Barrels    _____ Tons <b>7</b> YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input checked="" type="checkbox"/> Other: <b>Pit dried up from evaporation</b>			
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: <b>N/A</b>	
Operator Name: <b>N/A</b>		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: _____	
Comments:			

RECEIVED  
KANSAS CORPORATION COMMISSION  
**OCT 14 2008**  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is Office Manager  
for Heartland Oil & Gas Corp. (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 3 day of October, 2008  
Shirley D. Trumbly  
Notary Public  
My Commission Expires: 6/3/2012

