

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2004  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

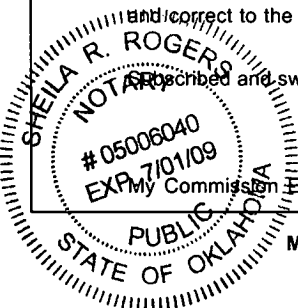
Operator Name: <b>EOG Resources, Inc.</b>		License Number: <b>5278</b>	
Operator Address: <b>3817 NW Expressway #500, Oklahoma City, OK 73112</b>			
Contact Person: <b>Sheila Rogers</b>		Phone Number: ( <b>405</b> ) <b>246 - 3236</b>	
Permit Number (API No. if applicable): <b>129-21835 0000</b>		Lease Name: <b>Bozone</b>	
Source of Waste:		Well Number: <b>9 #1</b>	
<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		Source Location (QQQQ): <b>S/2 - NW - SW - NW</b> Sec. <b>9</b> Twp. <b>33</b> R. <b>39</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>1750'</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>330'</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>Morton</b> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste:      _____ No. of loads      _____ Barrels      _____ Tons      _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input 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: _____	
Operator Name: <b>No free fluids in pit when drilling</b>		License No.: _____	
Lease Name: <b>operations were completed.</b>		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No.: _____		County: _____	

**RECEIVED**  
KANSAS CORPORATION COMMISSION  
  
**JUL 10 2008**  
  
CONSERVATION DIVISION  
WICHITA, KS

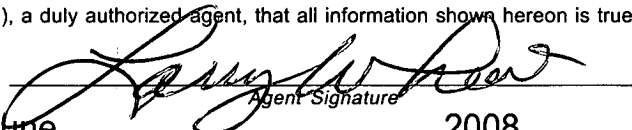
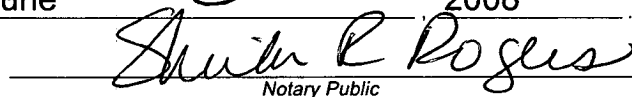
The undersigned hereby certifies that he / she is Applicant  
for EOG Resources, Inc. (Co.), a duly authorized agent, that all information shown hereon is true

and correct to the best of his / her knowledge and belief.

Subscribed and sworn to before me on this 17th day of June, 2008



My Commission Expires: 07-01-09

  
 \_\_\_\_\_  
 Agent Signature  
  
  
 \_\_\_\_\_  
 Notary Public