

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


Form CDP-5
August 2004
Form must be Typed

Operator Name: <u>Rama Operating Co., Inc.</u>		License Number: <u>3911</u>										
Operator Address: <u>P.O. Box 159 Stafford, KS. 67578</u>												
Contact Person: <u>Robin L. Austin</u>		Phone Number: (<u>620</u>) <u>234 - 5191</u>										
Permit Number (API No. if applicable): <u>15-007-23304-0000</u>		Lease Name: <u>Smith-Hall</u>										
Source of Waste: <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Emergency Pit</td> <td><input type="checkbox"/> Dike</td> </tr> <tr> <td><input type="checkbox"/> Workover Pit</td> <td><input type="checkbox"/> Settling Pit</td> </tr> <tr> <td><input type="checkbox"/> Burn Pit</td> <td><input checked="" type="checkbox"/> Drilling Pit</td> </tr> <tr> <td><input type="checkbox"/> Steel Pit</td> <td><input type="checkbox"/> Haul-off Pit</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Spill / Escape</td> </tr> </table>		<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"/> Spill / Escape	Well Number: <u>1-6</u>
<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"/> Spill / Escape											
Source Location (QQQQ): <u> </u> - <u>C</u> - <u>S/2</u> - <u>Ne</u> Sec. <u>6</u> Twp. <u>30</u> R. <u>13</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1,821</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1,292</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>7</u> No. of loads <u>560</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 type="checkbox"/> No												
Location of waste disposal:		Date of Waste Transfer: <u>6-4-08</u>										
Operator Name: <u>Bullseye Oilfield Service, Inc.</u>		License No.: <u>31056</u>										
Lease Name: <u>Clark SWD</u>		Sec. <u>10</u> Twp. <u>26</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West										
Docket No.: <u>D-21405</u>		County: <u>Pratt</u>										

RECEIVED
KANSAS CORPORATION COMMISSION

JUL 11 2008

CONSERVATION DIVISION
WICHITA, KS

The undersigned hereby certifies that he / she is <u>Robin L. Austin</u> for <u>Rama Operating 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.	
Subscribed and sworn to before me on this <u>8th</u> day of <u>July</u> , <u>2008</u>  My Commission Expires: <u>5-1-11</u>	_____ Agent Signature _____ Notary Public