

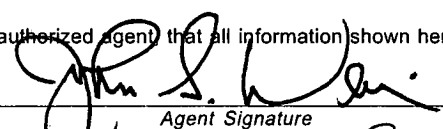
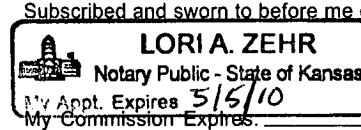
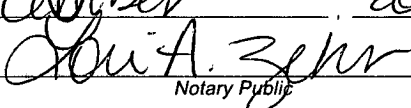
KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Oil Producers Inc. of Kansas</u>		License Number: <u>8061</u>										
Operator Address: <u>1710 Waterfront Parkway, Wichita, KS 67206</u>												
Contact Person: <u>Lori Zehr</u>		Phone Number: (<u>316</u>) <u>681</u> - <u>0231</u>										
Permit Number (API No. if applicable): <u>15-033-21502-00-00</u>		Lease Name: <u>Leon May</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>#3-13</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>NW</u> - <u>NW</u> Sec. <u>13</u> Twp. <u>35</u> R. <u>16</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>660</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>660</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Comanche</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>2</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>9/27/2007</u>										
Operator Name: <u>Oil Producers Inc. of Kansas</u>		License No.: <u>8061</u>										
Lease Name: <u>8061</u>		Sec. <u>13</u> Twp. <u>35</u> R. <u>16</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West										
Docket No.: <u>D-28472</u>		County: <u>Comanche</u>										

RECEIVED
KANSAS CORPORATION COMMISSION
DEC 12 2007
CONSERVATION DIVISION
WICHITA, KS

The undersigned hereby certifies that he / she is <u>President</u>	
for <u>Oil Producers Inc. of Kansas</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>11th</u> day of <u>December</u> <u>2007</u>	 Agent Signature
	 Notary Public