

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

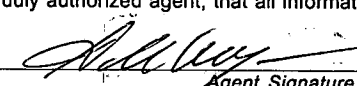
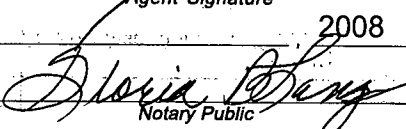
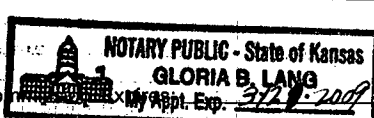
EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>R.P. Nixon Oper., Inc.</u>		License Number: <u>5252</u>
Operator Address: <u>207 West 12th Street Hays, KS 67601</u>		
Contact Person: <u>Dan Nixon</u>		Phone Number: (<u>785</u>) <u>628</u> - <u>3834</u>
Permit Number (API No. if applicable): <u>15-051-25,757 0000</u>		Lease Name: <u>Meier</u>
Source of Waste: <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		Well Number: <u>8</u> Source Location (QQQQ): <u>app.</u> - <u>NW</u> - <u>NE</u> - <u>SE</u> Sec. <u>8</u> Twp. <u>14</u> R. <u>19</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2060</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1220</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Ellis</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>1</u> No. of loads <u>78</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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Location of waste disposal: _____		Date of Waste Transfer: <u>5/22/08</u>
Operator Name: <u>Hertel Oil, LLC</u>		License No.: <u>33625</u>
Lease Name: <u>Oldham SWD</u>		Sec. <u>4</u> Twp. <u>15</u> R. <u>18</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No.: <u>D-20,214</u>		County: <u>Ellis</u>

RECEIVED
KANSAS CORPORATION COMMISSION

JUN 06 2008

CONSERVATION DIVISION
WICHITA, KS

The undersigned hereby certifies that he / she is <u>President</u>	
for <u>R.P. Nixon Operations, 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.	
 _____ Agent Signature	
Subscribed and sworn to before me on this <u>4th</u> day of <u>June</u> <u>2008</u>	
 _____ Notary Public	
 My Comm. No. _____ My App. Exp. <u>3/22/2009</u>	