



KANSAS CORPORATION COMMISSION 1030055  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Osborn Energy, L.L.C.</b>		License Number: <b>32294</b>
Operator Address: <b>24850 FARLEY BUCYRUS KS 66013 9264</b>		
Contact Person: <b>Curstin Hamblin</b>		Phone Number: ( <b>913</b> ) <b>533 - 9900</b>
Permit Number (API No. if applicable): <b>15-121-28714-0000</b>		Lease Name: <b>Markle</b>
Source of Waste:		Well Number: <b>3-21</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"/> Spill / Escape		Source Location (QQQQ): <u>SE</u> <u>SW</u> <u>NE</u> <u>SE</u> Sec. <u>21</u> Twp. <u>16</u> R. <u>25</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>1430</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>920</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Miami</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: _____ No. of loads <u>50</u> Barrels    _____ Tons    _____ YDS		
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off 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>7/24/2009</u>
Operator Name: <b>Osborn Energy, L.L.C.</b>		License No.: <b>32294</b>
Lease Name: <b>SOMEDAY</b>		Sec. <u>12</u> Twp. <u>16</u> R. <u>24</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: <b>D27845</b>		County: <b>Miami</b>
Comments:		
<p style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">Rec'd 7-29-09</p>		
<p>Submitted Electronically</p>		