

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: F.G. Holl Company L.L.C.		License Number: 5060
Operator Address: 9431 E. Central Wichita Ks, 67206		
Contact Person: Franklin R. Greenbaum		Phone Number: (316) 684 - 8481 Ext. 206
Permit Number (API No. if applicable): 15145215610000		Lease Name: BROCHER "A"
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: 1-2 Source Location (QQQQ): <u> </u> - <u> E/2 </u> - <u> E/2 </u> - <u> E/2 </u> Sec. <u> 2 </u> Twp. <u> 1221 </u> R. <u> 15 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 1220 </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u> 330 </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u> PAWNEE </u> County

Type of waste to be disposed: Fluid Soil Mud / Cuttings Other: **NO FREE FLUIDS TO BE HAULED**

Amount of waste: _____ No. of loads _____ Barrels _____ Tons _____ YDS

Destination of waste: Reserve Pit Disposal Well Lease Road Dike / Berm Other: _____

If waste is transferred to another reserve pit, is the lease active? Yes No

Location of waste disposal: _____ Date of Waste Transfer: _____

Operator Name: _____ License No.: _____

Lease Name: _____ Sec. _____ Twp. _____ R. _____ East West

Docket No.: _____ County: _____

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 09 2008

CONSERVATION DIVISION
WICHITA, KS

State of Kansas County Of **Sedgwick**
 The undersigned hereby certifies that he / she is **Geologist Assistant**
 for **F.G. Holl Company L.L.C.** (Co.), a duly authorized agent, that all information shown hereon is true
 and correct to the best of his / her knowledge and belief. **Adam T. Thorne**

 Agent Signature

Subscribed and sworn to before me on this **9** day of **JANUARY** **2008**

Betty H. Spotswood

 Betty H. Spotswood
 Notary Public

Notary Public - State of Kansas
 My Commission Expires **4/30/2010**
 My Appointment Expires **4/30/2010**