



KANSAS CORPORATION COMMISSION 1031439  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: Dvorachek, Harold A. dba Quest Development Co.		License Number: 4175	
Operator Address: PO BOX 413 IOLA KS 66749 0413			
Contact Person: H. Dvorachek		Phone Number: ( 620 ) 365 - 5862	
Permit Number (API No. if applicable): 15-031-22466-0000		Lease Name: Lehmann	
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: 4  Source Location (QQQQ): <u>NW - SW - SW - NW</u> Sec. <u>33</u> Twp. <u>22</u> R. <u>17</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>1990</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>170</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Coffey</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>100</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>09/03/2009</u>	
Operator Name: <u>Kepley Well Service, LLC</u>		License No.: <u>33749</u>	
Lease Name: <u>TAYLOR</u>		Sec. <u>33</u> Twp. <u>27</u> R. <u>18</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>15-133-90400</u> <u>E 26368.1</u>		County: <u>Neosho</u>	
Comments:			
<p style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">Handwritten signature</p> <p style="font-size: 1.2em; margin-top: 20px;">Submitted Electronically</p>			