

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER *KCC*

Operator Name: <b>JOHNSON OIL</b>		License Number: <b>3077</b>	
Operator Address: <b>258 east highway 36 Phillipsburg Kansas 67661</b>			
Contact Person: <b>KEVIN JOHNSON</b>		Phone Number: ( <b>785</b> ) <b>543 -6171</b>	
Permit Number (API No. if applicable): <b>15-147-00439 -00.00</b>		Lease Name: <b>ELTISTE</b>	
Source of Waste:		Well Number: <b>1</b>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Workover Pit <input 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		Source Location (QQQQ): <b>C</b> - <b>ne</b> - <b>se</b> - Sec. <b>2</b> Twp. <b>3</b> R. <b>19</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>1980</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>660</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>Phillips county kansas</b> 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>35</u> Barrels    _____ Tons    _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input checked="" type="checkbox"/> Other: <u>reclaimer</u>			
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: <b>SEPTEMBER 3 2009</b>	
Operator Name: <b>WALLACE ENERGY RECLAIMING</b>		License No.: <b>unknown</b>	
Lease Name: <b>Plainville Kansas</b>		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: <b>ROOKS COUNTY KANSAS</b>	
Comments:			
<div style="border: 1px solid black; padding: 5px; display: inline-block;">           RECEIVED            SEP 28 2009            KCC WICHITA         </div>			
The undersigned hereby certifies that he / she is <u>OPERATOR</u> for <u>JOHNSON OIL</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. <u>[Signature]</u> Agent Signature			
Subscribed and sworn to before me on this <u>25<sup>th</sup></u> day of <u>September</u> <u>2009</u>			
My Commission Expires: <u>3/5/2011</u>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">             KONNIELYN JARVIS              NOTARY PUBLIC              STATE OF KANSAS              My App. Exp <u>3-5-2011</u> </div>	