



KANSAS CORPORATION COMMISSION 1032912  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

*JS*

Operator Name: <b>Liberty Oper &amp; Compl, Inc</b>		License Number: <b>8925</b>	
Operator Address: <b>308 W MILL PLAINVILLE KS 67663 2229</b>			
Contact Person: <b>Roger L. Comeau</b>		Phone Number: ( <b>785</b> ) <b>434 - 4686</b>	
Permit Number (API No. if applicable): <b>15-051-25865-00-00</b>		Lease Name: <b>Cora</b>	
Source of Waste:		Well Number: <b>2</b>	
<input type="checkbox"/> Emergency Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit		<input type="checkbox"/> Dike <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape	
		Source Location (QQQQ): <u>  <b>NW</b>  </u> - <u>  <b>SW</b>  </u> - <u>  <b>NE</b>  </u> - <u>  <b>NW</b>  </u> Sec. <u>  <b>9</b>  </u> Twp. <u>  <b>11</b>  </u> R. <u>  <b>17</b>  </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>  <b>860</b>  </u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>  <b>1330</b>  </u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>  <b>Ellis</b>  </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>  <b>2</b>  </u> No. of loads <u>  <b>70</b>  </u> Barrels <u>      </u> Tons <u>      </u> 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>  <b>6/17/2009</b>  </u>	
Operator Name: <u>  <b>Liberty Oper &amp; Compl, Inc</b>  </u>		License No.: <u>  <b>8925</b>  </u>	
Lease Name: <u>  <b>GANOUNG</b>  </u>		Sec. <u>  <b>8</b>  </u> Twp. <u>  <b>11</b>  </u> R. <u>  <b>17</b>  </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>  <b>15-051-30262-0002 D 28318, 0</b>  </u>		County: <u>  <b>Ellis</b>  </u>	
Comments:			
<p><i>Handwritten signature and date: 6/17/09</i></p>			
<p>Submitted Electronically</p>			