

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

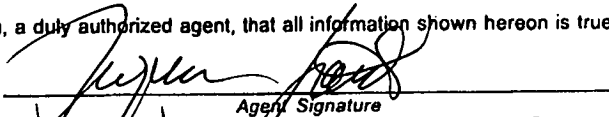
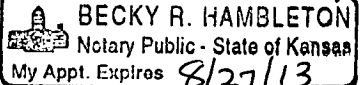

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>AX&P, Inc.</u>		License Number: <u>3830</u>	
Operator Address: <u>20147 200 Road Neodesha, KS 66757</u>			
Contact Person: <u>J J Hanke</u>		Phone Number: <u>(620) 325-5212</u>	
Permit Number (API No. if applicable): <u>15 205-27807-0000</u>		Lease Name: <u>Unit 1 - Wolfe West</u>	
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: <u>WW# 31C</u> Source Location (QQQQ): <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> Sec. <u>29</u> Twp. <u>30</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>1610</u> Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>4620</u> Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Wilson</u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: _____ No. of loads <u>2</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input checked="" type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input checked="" type="checkbox"/> Other: <u>New Drill Pit</u>			
If waste is transferred to another reserve pit, is the lease active? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u>Nov 20-09</u>	
Operator Name: <u>AX&P, Inc.</u>		License No.: <u>3830</u>	
Lease Name: <u>Unit 1</u>		Sec. <u>29</u> Twp. <u>30</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No.: <u>D-15-379</u>		County: <u>Wilson</u>	

RECEIVED
DEC 01 2009
KCC WICHITA

RECEIVED
NOV 24 2009
KCC WICHITA

The undersigned hereby certifies that he / she is <u>President</u> <u>P</u>	
for <u>AX&P, Inc.</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief.	
Subscribed and sworn to before me on this <u>20th</u> day of <u>November</u> , <u>2009</u>	 Agent Signature
 BECKY R. HAMBLETON Notary Public - State of Kansas My Appt. Expires <u>8/27/13</u>	 Notary Public
My Commission Expires: _____	