



KANSAS CORPORATION COMMISSION 1034000  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>A X &amp; P, Inc.</b>		License Number: <b>3830</b>	
Operator Address: <b>PO BOX 1176 INDEPENDENCE KS 67301 1176</b>			
Contact Person: <b>Jurgen Hanke</b>		Phone Number: ( <b>620</b> ) <b>331 - 0144</b>	
Permit Number (API No. if applicable): <b>15-205-27816-0000</b>		Lease Name: <b>UNIT 1- WOLFE WEST</b>	
Source of Waste:		Well Number: <b>WW 32 C</b>	
<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		Source Location (QQQQ): <u>NE</u> - <u>NW</u> - <u>SW</u> - <u>SW</u> Sec. <u>29</u> Twp. <u>30</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>1280</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>4630</u> Feet from <input checked="" 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 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>12/22/2009</u>	
Operator Name: <u>A X &amp; P, Inc.</u>		License No.: <u>3830</u>	
Lease Name: <u>ELLIS</u>		Sec. <u>29</u> Twp. <u>30</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>D15379</u>		County: <u>Wilson</u>	
Comments:			
<p style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">Rec'd 12/13/09</p> <p style="font-size: 1.2em; margin-top: 20px;">Submitted Electronically</p>			