



KANSAS CORPORATION COMMISSION 1033996
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Blue Ridge Petroleum Corporation		License Number: 31930
Operator Address: PO BOX 1913 ENID OK 73702 1913		
Contact Person: Jonathan Allen		Phone Number: (580) 242 - 3732
Permit Number (API No. if applicable): 15-057-20655-00-00		Lease Name: Long Branch
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number: 1-8 Source Location (QQQQ): <u>SE</u> <u>NE</u> <u>SE</u> <u>NW</u> Sec. <u>8</u> Twp. <u>27</u> R. <u>24</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1943</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>2559</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Ford _____ 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>3</u> No. of loads <u>240</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>12/15/2009</u>
Operator Name: <u>Hartman Oil Co., Inc.</u>		License No.: <u>30535</u>
Lease Name: <u>BILLINGS</u>		Sec. <u>35</u> Twp. <u>22</u> R. <u>23</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <u>D27511</u>		County: <u>Hodgeman</u>
Comments:		
<p>Submitted Electronically</p> <p style="text-align: right; font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">Rec'd 12/31/09</p>		