

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Edward E. Birk</b>		License Number: <b>8210</b>	
Operator Address: <b>302 South 16th St., Burlington, Ks 66839</b>			
Contact Person: <b>Edward E. Birk</b>		Phone Number: ( <b>620</b> ) <b>364 - 1311 - office</b>	
Permit Number (API No. if applicable): <b>15-031-22501 0000</b>		Lease Name: <b>Storror</b>	
Source of Waste:		Well Number: <b>11</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>  <b>NW</b>  </u> - <u>  <b>NE</b>  </u> - <u>  <b>NW</b>  </u> - <u>  <b>NE</b>  </u> Sec. <u>  <b>22</b>  </u> Twp. <u>  <b>22</b>  </u> R. <u>  <b>16</b>  </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>  <b>165</b>  </u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>  <b>1815</b>  </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>  <b>Coffey</b>  </u> County	

Type of waste to be disposed:  Fluid  Soil  Mud / Cuttings  Other: \_\_\_\_\_

Amount of waste: \_\_\_\_\_ No. of loads   **15**   Barrels \_\_\_\_\_ Tons \_\_\_\_\_ YDS

Destination of waste:  Reserve Pit  Haul Off Pit  Disposal Well  Lease Road  Dike / Berm  Other: \_\_\_\_\_

If waste is transferred to another reserve pit, is the lease active?  Yes  No

Location of waste disposal: \_\_\_\_\_ Date of Waste Transfer:   **03/08/10**  

Operator Name:   **Birk Petroleum**   License No.:   **31280**  

Lease Name:   **Winn Unit #4**   Sec.   **21**   Twp.   **22**   R.   **16**    East  West

Docket No./API No.:   **D-25,413**   County:   **Coffey**  

Comments:

RECEIVED  
MAR 24 2010  
KCC WICHITA

The undersigned hereby certifies that he / she is   **Agent**    
for   **Edward E. Birk**   (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   **23rd**   day of   **March**     **2010**  

My Commission Expires:   **January 22, 2012**  

Agent Signature:   *Linda K. Burt*    
Notary Public:   *Laura C. Birk*  

**LAURA C. BIRK**  
Notary Public - State of Kansas  
My Appt. Expires   **01/22/2012**