



KANSAS CORPORATION COMMISSION 1036495
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>L.D. Drilling, Inc.</u>		License Number: <u>6039</u>
Operator Address: <u>7 SW 26TH AVE GREAT BEND KS 67530 6525</u>		
Contact Person: <u>L.D. Davis</u>		Phone Number: (<u>620</u>) <u>793 - 3051</u>
Permit Number (API No. if applicable): <u>15-185-23606-00-00</u>		Lease Name: <u>STAN</u>
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"/> Spill / Escape		Well Number: <u>-1-10</u> Source Location (QQQQ): <u>SE - NW - SE - SW</u> Sec. <u>10</u> Twp. <u>21</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>950</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1730</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Stafford</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>4</u> No. of loads <u>320</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>02/22/2010</u>
Operator Name: <u>Bob's Oil Service, Inc.</u>		License No.: <u>32408</u>
Lease Name: <u>TEICHMAN</u>		Sec. <u>16</u> Twp. <u>22</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <u>D23722</u>		County: <u>Stafford</u>
Comments:		
Submitted Electronically <div style="text-align: right; font-style: italic; font-family: cursive;"> Rec'd 3/31/10 </div>		