

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>OXY USA, INC.</b>		License Number: <b>5447</b>	
Operator Address: <b>5 E GREENWAY PLAZA PO BOX 27570 HOUSTON, TX 77227-7570</b>			
Contact Person: <b>LAURA BETH HICKERT</b>		Phone Number: ( <b>620</b> ) <b>629 - 4253</b>	
Permit Number (API No. if applicable): <b>15-055-22068-00-00</b>		Lease Name: <b>HANDS A</b>	
Source of Waste:		Well Number: <b>1</b>	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u>SW</u> - <u>SE</u> - <u>NW</u> - <u>SE</u> Sec. <u>33</u> Twp. <u>25</u> R. <u>33</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1357</u> <sup>365</sup> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1669</u> <sup>204</sup> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>FINNEY</b> 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:      _____ No. of loads <u>120</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>04/24/2010</u>	
Operator Name: <u>NICHOLS FLUID SERVICE, INC.</u>		License No.: <u>31983</u>	
Lease Name: <u>SUBLETTE DISPOSAL</u>		Sec. <u>1</u> Twp. <u>32</u> R. <u>33</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>15-175-60002-00-01</u> <u>D 27972.0</u>		County: <u>SEWARD</u>	
Comments:			

RECEIVED  
KANSAS CORPORATION COMMISSION  
  
MAY 06 2010  
  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is LAURA BETH HICKERT ADMIN. ASSIST. REGULATORY  
for OXY USA, INC. (Co.), a duly authorized agent, that all information shown hereon is true

and correct to the best of his / her knowledge and belief.

*Laura Beth Hickert*  
Agent Signature

Subscribed and sworn to before me on this 4<sup>th</sup> day of May, 2010.

*Anita Peterson*  
Notary Public

My Commission Expires: Oct. 1, 2013

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas

ANITA PETERSON  
Notary Public - State of Kansas  
My Appt. Expires October 1, 2013

8