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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: ARDC, INC		License Number: 32062	
Operator Address: 108 W 34TH HAYS, KS 67601			
Contact Person: GREG WHITEHAIR		Phone Number: (785) 625 - 6588	
Permit Number (API No. if applicable): 15009 15298 23966-00-00		Lease Name: HOGAN LEASE	
Source of Waste:		Well Number: #B1	
<input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): C - N2 - SW - NE Sec. 11 Twp. 17 R. 11 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 3630 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1980 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section BARTON 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>1</u> No. of loads <u>80</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: 9/12/08	
Operator Name: BRACKEEN LINE CLEANING, INC.		License No.: KLN9952	
Lease Name: PRAEGER SWD		Sec. 27 Twp. 17 R. 11 <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: D-20,704		County: BARTON	
Comments:			
<p>The undersigned hereby certifies that he / she is <u>owner / President</u></p> <p>for <u>President D. Whitehair ARDC Inc</u> (Co.), a duly authorized agent, that all information shown hereon is true</p> <p>and correct to the best of his / her knowledge and belief. <u><i>Greg Whitehair</i></u></p> <p>Subscribed and sworn to before me on this <u>14th</u> day of <u>July</u>, <u>2010</u></p> <p><u><i>Amanda Bice</i></u></p> <p>My Commission Expires: <u>3-3-2014</u></p>			

AMANDA BICE
NOTARY PUBLIC
STATE OF KANSASMy App. Exp. 3-3-2014