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KCC WICHITA

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Oil Producers Inc. of Kansas		License Number: 8061	
Operator Address: 1710 Waterfront Parkway, Wichita, KS 67206			
Contact Person: Lori Zehr		Phone Number: ( 316 ) 681 - 231	
Permit Number (API No. if applicable): 15-163-22457-00-00		Lease Name: Arpin	
Source of Waste:		Well Number: #1	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): _____ - E2 - SW - NW Sec. 4 Twp. 9 R. 20 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 3300 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 4290 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section _____ Rooks _____ County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: _____ No. of loads _____ Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input 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: _____	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: _____	
Comments:  No fluids hauled.			
The undersigned hereby certifies that he/she is <u>Chief Operating Officer</u> for <u>Oil Producers Inc. of Kansas</u> (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 <u>7th</u> day of <u>July</u> , <u>2010</u>		<u>73</u> Agent Signature	
My Commission Expires: <u>May 5, 2014</u>		<u>Lori A. Zehr</u> Notary Public	
			