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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Brackeen Line Cleaning, Inc.</u>		License Number: <u>9952</u>	
Operator Address: <u>PO Box 434, Claflin, Kansas 67525-0434</u>			
Contact Person: <u>Darrin Smith</u>		Phone Number: (<u>620</u>) <u>587</u> - <u>3351</u>	
Permit Number (API No. if applicable): <u>1500922512 0000</u>		Lease Name: <u>Praeger #4 SWD D# 20,704</u>	
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Workover Pit <input 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		Well Number: Source Location (QQQQ): <u>SE</u> - <u>NE</u> - <u>NE</u> - Sec. <u>27</u> Twp. <u>17</u> R. <u>11</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>4606</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>380</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Barton</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: _____ No. of loads <u>200</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>11/20/2008</u>	
Operator Name: <u>Brackeen Line Cleaning, Inc.</u>		License No.: <u>9952</u>	
Lease Name: <u>Smith A</u>		Sec. <u>1</u> Twp. <u>18</u> R. <u>11</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>D# 21,214</u>		County: <u>Barton</u>	
Comments:			
The undersigned hereby certifies that he / she is <u>Vice President</u> for <u>Brackeen Line Cleaning, Inc.</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. <u>Darrin R. Smith</u> Agent Signature Subscribed and sworn to before me on this <u>1st</u> day of <u>July</u> <u>2010</u> <u>Danette L. Scharz</u> Notary Public My Commission Expires: <u>7-01-2011</u>			

Danette L. Scharz
Notary Public - State of Kansas
My Appt. Expires 7-1-2011