

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Noble Energy, Inc</b>		License Number: <b>33190</b>
Operator Address: <b>1625 Broadway Suite 2200 Denver, CO 80202</b>		
Contact Person: <b>Erin K Joseph</b>		Phone Number: ( <b>303</b> ) <b>228 - 4089</b>
Permit Number (API No. if applicable): <b>15-135-00614 0001</b>		Lease Name: <b>Shiner</b>
Source of Waste: <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		Well Number: <b>1</b>  Source Location (QQQQ): <b>SW - SE - - - - -</b> Sec. <b>13</b> Twp. <b>18</b> R. <b>26</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>1320</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>2200</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Ness</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 <b>100</b> 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: <b>9/30/08</b>
Operator Name: <b>Noble Energy, Inc.</b>		License No.: <b>33190</b>
Lease Name: <b>Aldrich SWD D-04</b>		Sec. <b>7</b> Twp. <b>18</b> R. <b>25</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <b>E14,618</b>		County: <b>Ness</b>
Comments:		

**RECEIVED**  
**AUG 18 2010**  
**KCC WICHITA**

The undersigned hereby certifies that he / she is *Regulatory Analyst II*  
 for *Noble Energy Inc* (Co.), a duly authorized agent, that all information shown hereon is true  
 and correct to the best of his / her knowledge and belief. *Erin K Joseph*  
 Agent Signature  
 Subscribed and sworn to before me on this *16<sup>th</sup>* day of *August*, *2008*  
*Mari Clark*  
 Notary Public  
 My Commission Expires: *My Commission Expires 12/17/2012*

