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Form CDP-5
August 2008
Form must be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

KCC WICHITA

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>EOG Resources, Inc.</u>		License Number: <u>5278</u>	
Operator Address: <u>3817 NW Expressway #500, Oklahoma City, Oklahoma 73112</u>			
Contact Person: <u>Sheila Rogers</u>		Phone Number: (<u>405</u>) <u>246</u> - <u>3236</u>	
Permit Number (API No. if applicable): <u>15-175-22184-00-00</u>		Lease Name: <u>Conover Trust</u>	
Source of Waste:		Well Number: <u>35 #2</u>	
<input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input 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 checked="" type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u>NW</u> - <u>SW</u> - <u>SE</u> - <u>NW</u> Sec. <u>35</u> Twp. <u>31</u> R. <u>34</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2250'</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1500'</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Seward _____ 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>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>08/12/2010</u>	
Operator Name: <u>Hayden Operating</u>		License No.: <u>33562</u>	
Lease Name: <u>Liz Smith</u>		Sec. <u>26</u> Twp. <u>30</u> R. <u>34</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D26802</u>		County: <u>Haskell</u>	
Comments:			
The undersigned hereby certifies that he / she is <u>Applicant</u> for <u>EOG Resources, 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.			
Subscribed and sworn to before me on this <u>18th</u> day of <u>August</u>		2010	
My Commission Expires: <u>7-1-13</u>		<u>Sheila R. Rogers</u> Notary Public	

