

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: VAL ENERGY INC.		License Number: 5822	
Operator Address: 200 W. DOUGLAS SUITE 520			
Contact Person: K. TODD ALLAM		Phone Number: (316) 263 - 6688	
Permit Number (API No. if applicable): 15-007-23555-00-00		Lease Name: STEVE MICHEL	
Source of Waste:		Well Number: 4-10	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input checked="" 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		Source Location (QQQQ): <u>S2</u> - <u>SW</u> - <u>NW</u> - <u>NW</u> Sec. <u>10</u> Twp. <u>34</u> R. <u>11</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1155</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>330</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>BARBER</u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u>3</u> No. of loads <u>240</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 checked="" type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u>8/9/2010</u>	
Operator Name: <u>VAL ENERGY INC</u>		License No.: <u>5822</u>	
Lease Name: <u>TALBOTT SWD</u>		Sec. <u>9</u> Twp. <u>34S</u> R. <u>11</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D30033</u>		County: <u>BARBER</u>	
Comments:			

RECEIVED
SEP 17 2010
KCC WICHITA

The undersigned hereby certifies that he / she is _____ AGENT
for **VAL 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. _____
Agent Signature

Subscribed and sworn to before me on this **17** day of **SEPT**, **2010**.

My Commission Expires: **2/24/14** _____
Notary Public

