

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Casino Petroleum LLC</b>		License Number: <b>4184</b>
Operator Address: <b>PO Box 415 Ellinwood, KS 67526</b>		
Contact Person: <b>Chris Batchman</b>		Phone Number: <b>( 620 ) 566 - 7111</b>
Permit Number (API No. if applicable) <b>009-25478-00-00</b>		Lease Name: <b>Sessler</b>
Source of Waste: <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 checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number: <b>8</b>
		Source Location (QQQQ): <u>SE</u> - <u>NW</u> - <u>SW</u> - _____ Sec. <u>24</u> Twp. <u>20</u> R. <u>11</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1650</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>825</u> Feet from <input type="checkbox"/> East / <input checked="" 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: <u>4</u> No. of loads <u>320</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>10-20-10</u>
Operator Name: <u>Casino Petroleum LLC</u>		License No.: <u>4184</u>
Lease Name: <u>Sessler</u>		Sec. <u>24</u> Twp. <u>20</u> R. <u>11</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <u>D-24167</u>		County: <u>Barton</u>
Comments:		
<div style="border: 2px solid black; padding: 5px; width: fit-content; margin: auto;"> <p style="text-align: center;">ALEXANDRA FEIL Notary Public State of Kansas My Commission Expires <u>7/31/2013</u></p> </div>		
The undersigned hereby certifies that he / she is <u>Vicki Batchman</u> for <u>Casino Petroleum LLC</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>[Signature]</u> Agent Signature		
Subscribed and sworn to before me on this <u>10</u> day of <u>November</u> <u>2010</u>		
My Commission Expires: <u>July 31, 2013</u>		<div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p style="text-align: center;">RECEIVED NOV 12 2010</p> </div>