

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

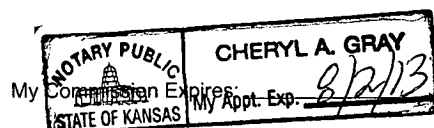
EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <b>Bobcat Oilfield Services, Inc.</b>		License Number: <b>3895</b>	
Operator Address: <b>30805 Coldwater Rd., Louisburg, Kansas 66053</b>			
Contact Person: <b>Bob Eberhart</b>		Phone Number: ( <b>913</b> ) <b>285 - 0873</b>	
Permit Number (API No. if applicable): <b>15-107-24263-00-00</b>		Lease Name: <b>Harvey</b>	
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input checked="" type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Well Number: <b>A-8</b>	
		Source Location (QQQQ): <u>  NW  </u> - <u>  NE  </u> - <u>  SE  </u> - <u>  SE  </u> Sec. <u>  5  </u> Twp. <u>  20  </u> R. <u>  23  </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>  1321  </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>  349  </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>  Linn  </u> County	
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u>  1  </u> No. of loads <u>  50  </u> Barrels    _____ Tons    _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input checked="" type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input checked="" type="checkbox"/> Other: <u>  steel pit  </u>			
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>  11/30/2010  </u>	
Operator Name: <u>  Bobcat Oilfield Service, Inc.  </u>		License No.: <u>  3895  </u>	
Lease Name: <u>  Harvey  </u>		Sec. <u>  5  </u> Twp. <u>  20  </u> R. <u>  23  </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>  15-107-24280-00-00  </u>		County: <u>  Linn  </u>	
Comments:  <p style="text-align: center;">Fluids moved to steel pit on next well to be drilled. Cuttings put on lease roads.</p>			

RECEIVED  
DEC 13 2010  
KCC WICHITA

The undersigned hereby certifies that he / she is Secretary  
for Bobcat Oilfield Service, Inc. (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 8 day of December, 2010



*[Signature]*  
Agent Signature  
*[Signature]*  
Notary Public