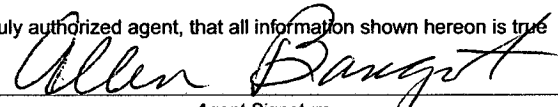




KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Mai Oil Operations, Inc.		License Number: 5259	
Operator Address: P.O. Box 33, Russell, Ks. 67665			
Contact Person: Allen Bangert		Phone Number: (785) 483 - 1676	
Permit Number (API No. if applicable): 15-147-23669-0000 15-167-23669-0000		Lease Name: Flegler	
Source of Waste: <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 checked="" type="checkbox"/> Steel Pit <input checked="" type="checkbox"/> Spill / Escape		Well Number: 2	
		Source Location (QQQQ): <u> </u> NW <u> </u> SW <u> </u> SE <u> </u> NE Sec. <u>10</u> Twp. <u>15</u> R. <u>14</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2185</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1150</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Russell</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> 2 </u> No. of loads <u>160</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: <u>Injection Well</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>11/10/2010</u>	
Operator Name: <u>Mai Oil Operations, Inc.</u>		License No.: <u>5259</u>	
Lease Name: <u>Louie</u>		Sec. <u>34</u> Twp. <u>14</u> R. <u>14</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>E-24559</u>		County: <u>Russell</u>	
Comments:			
<div style="border: 2px solid black; padding: 5px; display: inline-block; transform: rotate(-15deg);"> RECEIVED FEB 02 2011 KCC WICHITA </div>			
<p>The undersigned hereby certifies that he / she is _____ for _____ (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief.</p> <p style="text-align: right;">  _____ Agent Signature </p> <p> Subscribed and sworn to before me on this <u>21</u> day of <u>January</u>, <u>2011</u> </p> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 1px solid black; padding: 5px; text-align: center;">  LORI CRATHORNE My Appt. Expires <u>7-7-2014</u> </div> <div style="text-align: right;">  _____ Notary Public </div> </div> <p>My Commission Expires: _____</p>			

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202