

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>John O. Farmer, Inc.</u>		License Number: <u>5135</u>	
Operator Address: <u>P.O. Box 352, Russell, KS 67665</u>			
Contact Person: <u>Marge Schulte</u>		Phone Number: (<u>785</u>) <u>483</u> - <u>3145</u> , Ext. <u>214</u>	
Permit Number (API No. if applicable): <u>15-051-19,066 0000</u>		Lease Name: <u>Furthmeyer</u>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Dike <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Well Number: <u>#3</u> Source Location (QQQQ): _____ - <u>SW</u> - <u>SE</u> - <u>NW</u> Sec. <u>5</u> Twp. <u>14S</u> R. <u>19</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2310</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1650</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section _____ _____ 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>110</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>12-14-10 & 12-22-10</u>	
Operator Name: <u>John O. Farmer, Inc.</u>		License No.: <u>5135</u>	
Lease Name: <u>Furthmeyer #6</u>		Sec. <u>5</u> Twp. <u>14S</u> R. <u>19</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D-25,332</u>		County: <u>Ellis</u>	
Comments:			

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KCC WICHITA

The undersigned hereby certifies that he she is President
 for John O. Farmer, Inc. (Co.) a duly authorized agent, that all information shown hereon is true
 and correct to the best of his her knowledge and belief.

John O. Farmer III
Agent Signature

Subscribed and sworn to before me on this 11th day of January, 2011

Margaret A. Schulte
Notary Public

My Commission Expires:

