

EXPLORATION & PRODUCTION WASTE TRANSFER

07

Operator Name: ANR Pipeline Company		License Number: 32953	
Operator Address: 2135 11th Road			
Contact Person: Gary Goad		Phone Number: (620) 534-4400	
Permit Number (API No. if applicable): 15-159-22541-0000		Lease Name: MP 235.6	
Source of Waste:		Well Number: 1	
<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"/> Hand-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Source Location (OOOO): SW - NE - SW - Sec. 24 Twp. 19S R. 6 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1700 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1420 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Rice 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: _____ No. of loads 240 Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Barn <input checked="" type="checkbox"/> Other: pond			
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: 08-14-15-16-2007	
Operator Name: Schulz Welding Service, Inc. DBA Schulz Oil		License No.: 5172	
Lease Name: _____ and Gas, Inc.		Sec. 13 Twp. 19 R. 1 <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No.: _____		County: Marion	
The undersigned hereby certifies that he / she is <u>Operations Manager</u> for <u>Mesa Corrosion Control (Co.)</u> , a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. <u>Mick Mad</u> Agent Signature Subscribed and sworn to before me on this <u>7</u> day of <u>September</u> <u>2007</u> <u>Rhonda S. White Collier</u> Notary Public My Commission Expires: <u>11/2009</u>			

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

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