

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 - 2169	
Permit Number (API No. if applicable): 15-167-23698-0000		Lease Name: Louie	
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 type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Well Number: 7	
		Source Location (QQQQ): <u> NW </u> - <u> SE </u> - <u> NW </u> - <u> SW </u> Sec. <u> 34 </u> Twp. <u> 14 </u> R. <u> 14 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 1935 </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u> 750 </u> Feet from <input type="checkbox"/> East / <input checked="" 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> 1 </u> No. of loads <u> 80 </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> 03/28/2011 </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:			

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MAY 04 2011
KCC WICHITA

The undersigned hereby certifies that he / she is **Allen Bangert**
 for **Mai Oil Operations, Inc.** (Co.), a duly authorized agent, that all information shown hereon is true
 and correct to the best of his / her knowledge and belief.

 Allen Bangert
Agent Signature

Subscribed and sworn to before me on this **3** day of **May** **2011**

NOTARY PUBLIC State of Kansas
LORI CRATHORNE
My Appt. Expires **7-7-2014**

 Lori Crathorne
Notary Public

My Commission Expires: _____