

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Globe Operating, Inc.		License Number: 6170	
Operator Address: P.O. Box 12		Great Bend, KS 67530	
Contact Person: Richard Stalcup		Phone Number: (620) 792 - 7607	
Permit Number (API No. if applicable): 15-009-0394 ⁰⁻⁰⁰⁰⁰ ₀₋₀₀₀₀		Lease Name: Peterman	
Source of Waste:		Well Number: #2	
<input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u> </u> - <u>N/2</u> - <u>NW</u> - <u>NE</u> Sec. <u>24</u> Twp. <u>17</u> R. <u>11</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>330'</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1980</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Barton</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>35</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: 04/19/2011	
Operator Name: Brackeen Line Cleaning		License No.: 9952	
Lease Name: Praeger #4 SWD		Sec. <u>27</u> Twp. <u>17</u> R. <u>11</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: D-20,704		County: Barton	
Comments:			
<p>The undersigned hereby certifies that he / she is <u>a consultant</u> for <u>Globe Operating, Inc.</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. <u>Tom Dickson</u> Agent Signature</p> <p>Subscribed and sworn to before me on this <u>25th</u> day of <u>April</u>, <u>2011</u> <u>KAREN J. MITCHELL</u> Notary Public - State of Kansas My Appt. Expires <u>4/13/2014</u> <u>Karen J. Mitchell</u> Notary Public</p> <p>My Commission Expires: <u>4/13/2014</u></p>			

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