

*CORRECTED COPY

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: WOOLSEY OPERATING COMPANY, LLC		License Number: 33168	
Operator Address: 125 N. MARKET STE 1000, WICHITA, KS 67202-1729			
Contact Person: CARL W. DURR / CAROL WARD		Phone Number: (620) 886 - 5606 EXT 21	
Permit Number (API No. if applicable): 15-007-23599-00-00		Lease Name: GATES	
Source of Waste:		Well Number: 1	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): _____ - _____ - NW - NE Sec. <u>27</u> Twp. <u>34</u> R. <u>10</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>660</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>Barber</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>5</u> No. of loads <u>700</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>11/01/2010</u>	
Operator Name: <u>Woolsey Operating Co, LLC</u>		License No.: <u>33168</u>	
Lease Name: <u>ALLEN C</u>		Sec. <u>26</u> Twp. <u>34</u> R. <u>13</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D30360</u>		County: <u>Barber</u>	
Comments:			

RECEIVED
JUL 05 2011
KCC WICHITA

The undersigned hereby certifies that he she is Field Manager
for Woolsey Operating (Co.), a duly authorized agent, that all information shown hereon is true
and correct to the best of his / her knowledge and belief. Carl W. Durr
Agent Signature

Subscribed and sworn to before me on this 29 day of June 2011

My Commission Expires _____ My Appt. Exp. 8/23/12
Charlotte C. Hoagland
Notary Public