

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Thomason Petroleum Inc.</u>		License Number: <u>9957</u>	
Operator Address: <u>Box 875, Hays Kansas 67601</u>			
Contact Person: <u>Steven Thomason</u>		Phone Number: (<u>785</u>) <u>625</u> - <u>9045</u>	
Permit Number (API No. if applicable): <u>15-163-20334-00-01</u>		Lease Name: <u>Whisman</u>	
Source of Waste: <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		Well Number: <u>1-V SWD</u>	
		Source Location (QQQQ): <u>NE</u> - <u>SW</u> - <u>NE</u> - <u>SW</u>	
		Sec. <u>9</u> Twp. <u>9</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
		<u>1652</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section	
		<u>3302</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section	
		Rooks 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 checked="" type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u>5/2/11</u>	
Operator Name: <u>Thomason Petroleum Inc.</u>		License No.: <u>9957</u>	
Lease Name: <u>Whisman 1-V SWD</u>		Sec. <u>9</u> Twp. <u>9</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D-20,294</u>		County: <u>Rooks</u>	
Comments:			

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

[Signature]
Agent Signature

_____ 2011

MELISSA A MILLER
Notary Public
State of Kansas
My Commission Expires 2-8-15

Subscribed and sworn to before me on this 12th day of May _____ 2011

[Signature]
Notary Public

My Commission Expires: 2-8-15

RECEIVED
MAY 19 2011
KCC WICHITA