

15-107-24526-0000

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: **Bobcat Oilfield Service, Inc.** License Number: **3895**

Operator Address: **30805 Coldwater Road, Louisburg, Kansas 66053**

Contact Person: **Bob Eberhart** Phone Number: ( **913** ) **285 - 0873**

Permit Number (API No. if applicable): **15-107-24526-00-00** Lease Name: **South Baker**

Source of Waste:  
 Emergency Pit  Dike  
 Workover Pit  Settling Pit  
 Burn Pit  Drilling Pit  
 Steel Pit  Haul-off Pit  
 Spill / Escape  
Well Number: **M-5**  
Source Location (QQQQ):   **NW**     **SW**     **SE**     **SW**    
Sec.   **5**   Twp.   **20**   R.   **23**    East  West  
  **598**   Feet from  North /  South Line of Section  
  **3971**   Feet from  East /  West Line of Section  
  **Linn**   County

Type of waste to be disposed:  Fluid  Soil  Mud / Cuttings  Other: \_\_\_\_\_

Amount of waste:   **1**   No. of loads   **50**   Barrels \_\_\_\_\_ Tons \_\_\_\_\_ YDS

Destination of waste:  Reserve Pit  Haul Off Pit  Disposal Well  Lease Road  Dike / Berm  Other:   **steel pit**  

If waste is transferred to another reserve pit, is the lease active?  Yes  No

Location of waste disposal: \_\_\_\_\_ Date of Waste Transfer:   **8/29/2011**  

Operator Name:   **Bobcat Oilfield Service, Inc.**   License No.:   **3895**  

Lease Name:   **South Baker**   Sec.   **5**   Twp.   **20**   R.   **23**    East  West

Docket No./API No.:   **15-107-24522-00-00**   County:   **Linn**  

Comments:

**Fluids moved to steel pit on next well to be drilled.  
Cuttings put on lease roads.**

RECEIVED  
OCT 14 2011  
KCC WICHITA

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

Subscribed and sworn to before me on this   **12<sup>th</sup>**   day of   **October**  ,   **2011**  

My Commission Expires:   **6-15-15**    
  *[Signature]*   Agent Signature  
  *[Signature]*   Notary Public  
**SUSAN CALDWELL**  
NOTARY PUBLIC  
STATE OF KANSAS  
My Not. Exp.   **6-15-15**