

15-137-00691-0000

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: John O. Farmer, Inc.		License Number: 5135	
Operator Address: P.O. Box 352, Russell, KS 67665			
Contact Person: Marge Schulte		Phone Number: (785) 483 - 3145, Ext. 214	
Permit Number (API No. if applicable): 15-137-00,691		Lease Name: Lawson "A"	
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Workover Pit <input 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: #8 Source Location (QQQQ): - C - W2 - NW Sec. 36 Twp. 3S R. 24 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1,320 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 660 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Norton 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: _____ No. of loads <input type="checkbox"/> app. 400 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: 7-21-11 & 7-25-11	
Operator Name: T & C Manufacturing & Operating, Inc.		License No.: 31826	
Lease Name: Carr-Sneed SWD		Sec. 31 Twp. 3S R. 23 <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: D-4,729 D04729.0		County: Norton	
Comments:			

RECEIVED
AUG 26 2011
KCC WICHITA

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

John O. Farmer, Inc.
Agent Signature
Subscribed and sworn to before me on this 23rd day of August, 2011
Margaret A. Schulte
Notary Public

