

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Kraft Oil LLC		License Number: 6227	
Operator Address: 434 Iris Rd Sw Gridley, Ks 66852			
Contact Person: Thomas A. Kraft		Phone Number: (620) 836 - 2091	
Permit Number (API No. if applicable): 15-207-27938-0000		Lease Name: Browne	
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input checked="" 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: 9 Source Location (QQQQ): <u>NW - SE - SW - SW</u> Sec. <u>31</u> Twp. <u>23</u> R. <u>15</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>600</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>930</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Woodson</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>30</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>10/06/2011</u>	
Operator Name: <u>Kraft Oil LLC</u>		License No.: <u>6227</u>	
Lease Name: <u>S.Weide/Browne/Fee/Stockebrand unit</u>		Sec. <u>6</u> Twp. <u>24</u> R. <u>15</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>E13070 , </u>		County: <u>Woodson</u>	
Comments:			

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The undersigned hereby certifies that he / she is **Agent**
 for **Kraft Oil LLC** (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 **7th** day of **October**, **2011**
 My Commission Expires: **6/25/2012**

Thomas A. Kraft
Agent Signature

Cindy L. Beyer
Notary Public

CINDY L. BEYER
 Notary Public - State of Kansas
 My Appt. Expires **6/25/12**