

15-009-25601-0000

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Hupfer Operating, Inc.		License Number: 30380	
Operator Address: P.O. Box 3912 Shawnee, KS 66203 + 0912			
Contact Person: Dennis D. Hupfer		Phone Number: (913) 400 - 3777	
Permit Number (API No. if applicable): 009-25,601-00-00		Lease Name: Knop "A"	
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 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		Source Location (QQQQ): <u> </u> - NE - NW - SE Sec. <u>32</u> Twp. <u>19S</u> R. <u>11W</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2005</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1520</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Barton</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>4</u> No. of loads <u>320</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: 9/15/11 & 9/19/11
Operator Name: Bob's Oil Service, Inc.	License No.: 32408
Lease Name: Sieker(SWD)	Sec. 35 Twp. 19S R. 11W <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: D-26,497	County: Barton
Comments:	

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KCC WICHITA

The undersigned hereby certifies that he / ~~she~~ is **President**
 for **Hupfer Operating, 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 26 day of September, 2011
 My Commission Expires: 7/10/14

Dennis D. Hupfer
 Dennis D. Hupfer Agent Signature

Sabrina Brennan
 Notary Public

SABRINA BRENNAN
 Notary Public
 State of Kansas
 My Commission Expires 7/10/14