

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>W.R. Bigley</u>		License Number: <u>34542</u>	
Operator Address: <u>17745 W373 Poola, KS 66071</u>			
Contact Person: <u>W.R. Bigley</u>		Phone Number: <u>(913) 849-3264</u>	
Permit Number (API No. if applicable): <u>15-121-28900-0000</u>		Lease Name: <u>Bigley</u>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input checked="" 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</u>	
		Source Location (QQQQ): <u>SW - SE - NE - SE</u>	
		Sec. <u>30</u> Twp. <u>18</u> R. <u>24</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
		<u>1327</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>561</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Miami</u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: _____ No. of loads _____ Barrels <u>5</u> Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: <u>Buried</u>			
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: _____	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: _____		County: _____	

Comments:

Did not transfer any-
only Lime and rock dust.
Dried out and covered with original soil.

The undersigned hereby certifies that he / she is W. R. Bigley
for _____ (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 18TH day of November

My Commission Expires: 10/23/2013

W. R. Bigley
Agent Signature

2011
Ginny L. Gabbert
Notary Public

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KCC WICHITA

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

