



KANSAS CORPORATION COMMISSION 1047795  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Popp Operating, Inc.</b>		License Number: <b>32325</b>	
Operator Address: <b>191 NE 150 RD PO BOX 187 HOISINGTON KS 67544 9103</b>			
Contact Person: <b>RICKEY POPP</b>		Phone Number: ( <b>620</b> ) <b>653 -2737</b>	
Permit Number (API No. if applicable): <b>15-167-23673-00-00</b>		Lease Name: <b>DUMLER</b>	
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: <b>3</b>	
		Source Location (QQQQ): <u><b>E2</b></u> - <u><b>SE</b></u> - <u><b>NW</b></u> - <u><b>SW</b></u> Sec. <u><b>36</b></u> Twp. <u><b>15</b></u> R. <u><b>14</b></u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u><b>1650</b></u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u><b>1140</b></u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u><b>Russell</b></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><b>4</b></u> No. of loads <u><b>320</b></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><b>11/16/2010</b></u>	
Operator Name: <u><b>Popp Operating, Inc.</b></u>		License No.: <u><b>32325</b></u>	
Lease Name: <u><b>MICHAELIS A</b></u>		Sec. <u><b>36</b></u> Twp. <u><b>15</b></u> R. <u><b>14</b></u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u><b>D28748</b></u>		County: <u><b>RUSSELL</b></u>	
Comments:			
Submitted Electronically			