

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form GDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Ken L. Cody</b>		License Number: <b>7786</b>
Operator Address: <b>1125 Road 27, Longton, Kansas- 67352</b>		
Contact Person: <b>Ken L. Cody</b>		Phone Number: ( <b>620</b> ) <b>642 - 6123</b>
Permit Number (API No. if applicable): <b>15-049-22549-0000</b>		Lease Name: <b>Cody</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>101</b>
		Source Location (QQQQ): <u>    </u> <b>NW</b> <u>  </u> <b>SE</b> <u>  </u> <b>SE</b> <u>  </u> <b>NW</b> Sec. <u>  </u> <b>12</b> Twp. <u>  </u> <b>30</b> R. <u>  </u> <b>12</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>  </u> <b>3115</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>  </u> <b>3240</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>  </u> <b>EIK</b> 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>  </u> <b>8</b> No. of loads <u>  </u> <b>300</b> Barrels <u>  </u> Tons <u>  </u> 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>  </u> <b>6-19-2011</b>
Operator Name: <u>  </u> <b>Ken L. Cody</b>		License No.: <u>  </u> <b>7786</b>
Lease Name: <u>  </u> <b>Tredway</b>		Sec. <u>  </u> <b>2</b> Twp. <u>  </u> <b>30</b> R. <u>  </u> <b>12</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: <u>  </u> <b>E-30509</b>		County: <u>  </u> <b>EIK</b>
Comments:  <p style="text-align: center;"><b>RECEIVED</b> <b>NOV 14 2011</b> <b>KCC WICHITA</b></p>		

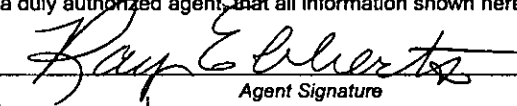
The undersigned hereby certifies that he / she is \_\_\_\_\_ AGENT  
 for    **Ken L. Cody- Painterhood Oil** \_\_\_\_\_ (Co.), a duly authorized agent, that all information shown hereon is true  
 and correct to the best of his / her knowledge and belief.

Subscribed and sworn to before me on this    **10<sup>th</sup>** day of    **November**,    **2011**.

My Commission Expires: \_\_\_\_\_



**Maria Perry**  
NOTARY PUBLIC - STATE OF KANSAS  
MY APPT EXP 09-21-2014

  
\_\_\_\_\_  
Notary Public