



KANSAS CORPORATION COMMISSION 1051226
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Indian Oil Co., Inc.		License Number: 31938	
Operator Address: PO BOX 209 2507 SE US 160 HWY MEDICINE LODGE KS 67104 0209			
Contact Person: Anthony Farrar		Phone Number: (620) 886 - 3763	
Permit Number (API No. if applicable): 15-007-23640-00-00		Lease Name: Boonedocker	
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: 1 Source Location (QQQQ): <u> NW </u> <u> SW </u> <u> NW </u> <u> SE </u> Sec. <u> 6 </u> Twp. <u> 35 </u> R. <u> 11 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 1720 </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u> 2324 </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u> Barber </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: _____ No. of loads <u> 80 </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> 02/03/2011 </u>	
Operator Name: <u> BEMCO, LLC </u>		License No.: <u> 32613 </u>	
Lease Name: <u> MAC </u>		Sec. <u> 7 </u> Twp. <u> 32 </u> R. <u> 11 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u> 15-007-21428 </u> <u> D 21045.0 </u>		County: <u> Barber </u>	
Comments:			
Submitted Electronically			

