



KANSAS CORPORATION COMMISSION 1050233  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Southern Star Central Gas Pipeline, Inc.</b>		License Number: <b>33097</b>
Operator Address: <b>4700 HWY 56 OWENSBORO KY 42301 9303</b>		
Contact Person: <b>D. Mark Rouse</b>		Phone Number: <b>( 270 ) 852 - 4490</b>
Permit Number (API No. if applicable): <b>15-159-19222-00-01</b>		Lease Name: <b>Alden Gas Storage</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># O-5</b>  Source Location (QQQQ): <u>  NW  </u> <u>  NW  </u> <u>  NW  </u> <u>  SW  </u> Sec. <u>  22  </u> Twp. <u>  21  </u> R. <u>  9  </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>  2822  </u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>  95  </u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>  Rice  </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>  1  </u> No. of loads <u>  70  </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>  12/21/2010  </u>
Operator Name: <u>  Bob's Oil Service, Inc.  </u>		License No.: <u>  32408  </u>
Lease Name: <u>  SIEKER SWD  </u>		Sec. <u>  35  </u> Twp. <u>  19  </u> R. <u>  11  </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <u>  D26497  </u>		County: <u>  Barton  </u>
Comments:		
Submitted Electronically		