

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: B-C Steel, LLC		License Number: 33711
Operator Address: 209 N Fry Yates Center, Ks 66783		
Contact Person: Rex Homing		Phone Number: (620) 625 - 2999
Permit Number (API No. if applicable): 15035244350000		Lease Name: Darfus Stewart
Source of Waste:		Well Number: 17-3
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Source Location (QQQQ): <u> E2 </u> - <u> NE </u> - <u> NW </u> - <u> NE </u> Sec. <u> 17 </u> Twp. <u> 33 </u> R. <u> 6 </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u> 330 </u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u> 1520 </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u> Cowley </u> County

Type of waste to be disposed: Fluid Soil Mud / Cuttings Other: _____

Amount of waste: **1** No. of loads **60** Barrels _____ Tons _____ YDS

Destination of waste: Reserve Pit Haul Off Pit Disposal Well Lease Road Dike / Berm Other: _____

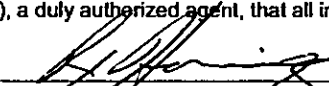
If waste is transferred to another reserve pit, is the lease active? Yes No

Location of waste disposal:	Date of Waste Transfer: 8-6-11
Operator Name: B-C Steel, LLC	License No.: 33711
Lease Name: Darfus Stewart	Sec. <u> 17 </u> Twp. <u> 33 </u> R. <u> 6 </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: 15-035-244350000	County: Cowley

Comments:
Put in pit of 17-2

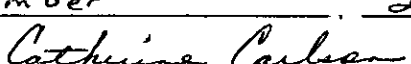
RECEIVED
 NOV 30 2011
 KCC WICHITA

The undersigned hereby certifies that he / she is **GM**
 for **B-C STEEL LLC** (Co.), a duly authorized agent, that all information shown hereon is true
 and correct to the best of his / her knowledge and belief.



 Agent Signature

Subscribed and sworn to before me on this **28** day of **November** , **2011**



 Notary Public

My Commission Expires: **Aug 9, 2014**

CATHERINE CARLSON
 Notary Public - State of Kansas
 My Appt. Expires August 9, 2014