

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Staab Oil Co.</u>		License Number: <u>6037</u>	
Operator Address: <u>1607 Hopewell Rd Hays KS 67601</u>			
Contact Person: <u>Francis C. Staab</u>		Phone Number: (<u>785</u>) <u>6255013</u>	
Permit Number (API No. if applicable): <u>15-051-261460020</u>		Lease Name: <u>Vonfeldt Staab</u>	
Source of Waste:		Well Number: <u>2</u>	
<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>SE-NE-NE</u> Sec. <u>19</u> Twp. <u>12</u> R. <u>19</u> <input checked="" type="checkbox"/> East <input checked="" type="checkbox"/> West <u>880</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>330</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Ellis</u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: _____ No. of loads <u>240</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>June 26 - 11</u>	
Operator Name: <u>Clamar Oil</u>		License No.: <u>1605</u>	
Lease Name: <u>Dechant SWD</u>		Sec. <u>17</u> Twp. <u>14</u> R. <u>18</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>24904</u>		County: <u>Ellis</u>	
Comments:			

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The undersigned hereby certifies that he / she is Francis C. Staab
for Staab Oil Co. (Co.), a duly authorized agent, that all information shown hereon is true

and correct to the best of his / her knowledge and belief. Francis C. Staab
Agent Signature

Subscribed and sworn to before me on this 17 day of November, 2011

My Commission Expires: 6-29-2014 Jody L. Staab
Notary Public

