



KANSAS CORPORATION COMMISSION 1051378
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Thomason Petroleum, Inc		License Number: 9957	
Operator Address: 301 W 13TH ST PO BOX 875 HAYS KS 67601			
Contact Person: Steven Thomason		Phone Number: (785) 625 - 9045	
Permit Number (API No. if applicable): 15-065-23645-00-00		Lease Name: Lambert A	
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: 3 Source Location (QQQQ): <u>SE</u> <u>NE</u> <u>SW</u> <u>NE</u> Sec. <u>1</u> Twp. <u>10</u> R. <u>21</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1720</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1550</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Graham</u> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input checked="" type="checkbox"/> Other: <u>none removed</u>			
Amount of waste: _____ No. of loads <u>0</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input checked="" type="checkbox"/> Other: <u>none removed</u>			
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>2/8/2011</u>	
Operator Name: <u>Thomason Petroleum, Inc</u>		License No.: <u>9957</u>	
Lease Name: <u>Lambert A #3</u>		Sec. <u>1</u> Twp. <u>10</u> R. <u>21</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: _____		County: <u>Graham</u>	
Comments:			
Submitted Electronically			

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