


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Lone Wolf Oil Co.		License Number: 31119
Operator Address: Box 241 Moline, Ks. 67353		
Contact Person: Rob Wolfe		Phone Number: (620) 647 - 3626
Permit Number (API No. if applicable): ¹⁵ 049-22561-00-00		Lease Name: Durbin
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: 5
		Source Location (QQQQ): <u> </u> - <u> </u> - <u> </u> - <u> </u> NW - SW - SE/4 Sec. <u>3</u> Twp. <u>31</u> R. <u>10</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>990</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2310</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Elk</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>280</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>1-9-12</u>
Operator Name: <u>Lone Wolf Oil Co.</u>		License No.: <u>31119</u>
Lease Name: <u>Custer</u>		Sec. <u>12</u> Twp. <u>32</u> R. <u>9</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: <u>E-26,307 15-019-26,085</u>		County: <u>Chautauqua</u>
Comments:		
<p>RECEIVED JAN 13 2012 KCC WICHITA</p>		
<p>The undersigned hereby certifies that he / she is <u>Robert Wolfe</u> for <u>Lone Wolf Oil</u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. <u>Rob Wolfe</u> Agent Signature</p> <p>Subscribed and sworn to before me on this <u>12th</u> day of <u>January</u>, <u>2012</u>.</p> <p>My Commission  <u> </u> <u> </u> Notary Public</p>		