

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form GDP-5  
August 2008  
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

|  |  |   |  |
|--|--|---|--|
| Operator Name: <b>OXY USA, INC.</b>  |  | License Number: <b>5447</b>   |  |
| Operator Address: <b>P.O. BOX 2528 LIBERAL, KS 67905</b>   |  |   |  |
| Contact Person: <b>LAURA BETH HICKERT</b>  |  | Phone Number: ( <b>620</b> ) <b>629 - 4253</b>  |  |
| Permit Number (API No. if applicable): <b>15-055-22161-0660</b>  |  | Lease Name: <b>SMU</b>  |  |
| Source of Waste:   |  | Well Number: <b>318</b>   |  |
| <input type="checkbox"/> Dike<br><input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit<br><input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit<br><input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Haul-off Pit<br><input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape |  | Source Location (QQQQ): <u>SW</u> - <u>SE</u> - <u>SE</u> - <u>NE</u><br>Sec. <u>22</u> Twp. <u>23</u> R. <u>34</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West<br><u>2800</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section<br><u>600</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section<br><b>FINNEY</b> 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>120</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>08/03/2012</u>   |  |
| Operator Name: <b>NICHOLS FLUIS SERVICE, INC</b>   |  | License No.: <b>31983</b>   |  |
| Lease Name: <b>JOHNSON</b>   |  | Sec. <u>16</u> Twp. <u>34</u> R. <u>32</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West   |  |
| Docket No./API No.: <b>D27805</b>  |  | County: <b>SEWARD</b>   |  |
| Comments:  |  |   |  |

RECEIVED  
AUG 13 2012  
KCC WICHITA

The undersigned hereby certifies that he / she is Laura Beth Hickert  
for Oxy USA, Inc. (Co.), a duly authorized agent, that all information shown hereon is true  
and correct to the best of his / her knowledge and belief.

Laura Beth Hickert  
Agent Signature

Subscribed and sworn to before me on this 8<sup>th</sup> day of August, 2012.

**ANITA PETERSON**  
Notary Public - State of Kansas  
My Appt. Expires October 1, 2013

Anita Peterson  
Notary Public

My Commission Expires: Oct. 1, 2013