

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Chieftain Oil Co., Inc.</b>		License Number: <b>33235</b>
Operator Address: <b>P.O. Box 124 Kiowa, KS 67070</b>		
Contact Person: <b>Ron Molz</b>		Phone Number: ( <b>620</b> ) <b>825 - 4030</b>
Permit Number (API No. if applicable): <b>15-007-23624 0000</b>		Lease Name: <b>Yates A</b>
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Well Number: <b>7</b> Source Location (QQQQ): <u>NE</u> <u>SW</u> <u>SE</u> <u>NE</u> Sec. <u>36</u> Twp. <u>34</u> R. <u>12</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>3169</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>695</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Barber</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: <u>10</u> No. of loads <u>1000</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 checked="" type="checkbox"/> No		
Location of waste disposal: Operator Name: <b>Molz Oil Co., Inc</b> Lease Name: <b>Garner SWD</b> Docket No./API No.: <b>15-007-00572-0001 D 28060.0</b>		Date of Waste Transfer: <b>12/23/2010</b> License No.: <b>6006</b> Sec. <b>11</b> Twp. <b>33</b> R. <b>10</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West County: <b>Barber</b>
Comments:		

RECEIVED  
JAN 05 2011  
KCC WICHITA

The undersigned hereby certifies that he / she is Secretary  
for Chieftain Oil Co. Inc. (Co.), a duly authorized agent, that all information shown hereon is true  
and correct to the best of his / her knowledge and belief.  
Subscribed and sworn to before me on this 4 day of January, 2011  
My Commission Expires: 4-11-2011

*[Signature]*  
Agent Signature  
*[Signature]*  
Notary Public

