

Form CDP-5
August 2008
Form must be Typed

Operator Name: John O. Farmer, Inc.		License Number: 5135	
Operator Address: P.O. Box 352, Russell, KS 67665			
Contact Person: Marge Schulte		Phone Number: (785) 483 - 3145, Ext. 214	
Permit Number (API No. if applicable): 15-159-02,329-00-00		Lease Name: Hoops "B"	
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Well Number: #7 SWD Source Location (QQQQ): _____ C _____ SW _____ NE Sec. 8 Twp. 19S R. 10 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1980 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 1980 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Rice 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: 2 No. of loads 160 total 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: 10-26-10 (80 bbls.) & 10-28-10 (80 bbls.)	
Operator Name: Craig Oil Company		License No.: 31341	
Lease Name: Nuss SWD		Sec. 5 Twp. 16S R. 14 <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: D-09,153		County: Barton	
Comments:			
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The undersigned hereby certifies that he/she is President for John O. Farmer, 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 23rd day of November, 2010 My Commission Expires: 1-27-13 Agent Signature: Margaret A. Schulte Notary Public			

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202