

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>John O. Farmer, Inc.</b>		License Number: <b>5135</b>	
Operator Address: <b>P.O. Box 352, Russell, KS 67665</b>			
Contact Person: <b>Marge Schulte</b>		Phone Number: ( <b>785</b> ) <b>483 - 3145, Ext. 214</b>	
Permit Number (API No. if applicable): <b>15-137-00,525-00-00</b>		Lease Name: <b>Stapleton</b>	
Source of Waste:		Well Number: <b>#6</b>	
<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		Source Location (QQQQ): _____ - <b>W2</b> - <b>NE</b> Sec. <b>36</b> Twp. <b>3S</b> R. <b>24</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>1,320</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>1,980</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section _____ <b>Norton</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: <u>13</u> No. of loads <u>1,040</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: <b>9/18/2012</b>	
Operator Name: <b>T &amp; C Mfg. &amp; Operating, Inc.</b>		License No.: <b>31826</b>	
Lease Name: <b>C.D. Lawson #2</b>		Sec. <b>30</b> Twp. <b>3S</b> R. <b>23</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <b>D-08,072</b>		County: <b>Norton</b>	
Comments:			

**RECEIVED**  
**OCT 29 2012**  
**KCC WICHITA**

The undersigned hereby certifies that he/she is Vice-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. John O. Farmer, Inc.  
Subscribed and sworn to before me on this 26th day of October, 2012  
My Commission Expires: Margaret A. Schulte

