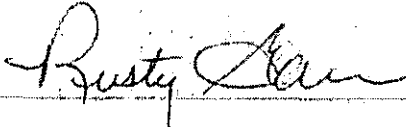


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: TRANSCANADA KEYSTONE PIPELINE		License Number: 34475	
Operator Address: 717 TEXAS ST, STE 24100			
Contact Person: CHUCK BUCY		Phone Number: (860) 939 - 3239	
Permit Number (API No. if applicable): 15117200230000		Lease Name: MP 658.25	
Source of Waste:		Well Number: 1	
<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 type="checkbox"/> Haul-off Pit <input checked="" type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape <input type="checkbox"/> Dike		Source Location (QQQQ): NW - NW - NW - NW Sec. 8 Twp. 1 R. 7 <input checked="" type="checkbox"/> East <input type="checkbox"/> West 162 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 95 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section GPS Location: Lat: 39.986542 Long: -96.676089 <small>(e.g. 33.00000)</small> <small>(e.g. -100.00000)</small> Datum: <input type="checkbox"/> NAD27 <input checked="" type="checkbox"/> NAD83 <input type="checkbox"/> WGS84 County: MARSHALL	
No Waste to be Hauled: <input type="checkbox"/> (If checked, provide an explanation as to why no waste was hauled in the Comments area.)			
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 151.2 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:			
Destination Out of State: <input type="checkbox"/> (If checked, provide the location of where the waste was hauled in the Comments area.)			
Operator Name: REDDI INDUSTRIES, INC		Date of Waste Transfer: 7/31/2012	
Lease Name: N/A		License No.: SOLID WASTE KDHE NO. 856	
Docket No./API No.: 15117200230000		Sec. 35 Twp. 27 R. 1 <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Comments:		County: SEDGWICK	
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.			
Date: 10/4/2012		Signature: 	
		Title: PROJECT COORDINATOR	