

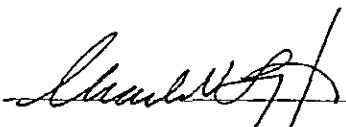
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KANSAS CORPORATION COMMISSION

MAY 16 2014

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

CONSERVATION DIVISION EXPLORATION & PRODUCTION WASTE TRANSFER
WICHITA, KS

Operator Name: <u>Husky Ventures, Inc.</u>		License Number: <u>34489</u>	
Operator Address: <u>204 N. Robinson Ave., Ste 1800 Oklahoma City, OK 73102</u>			
Contact Person: <u>Charles V. Long Jr.</u>		Phone Number: (<u>405</u>) <u>600</u> - <u>9393</u>	
Permit Number (API No. if applicable): <u>15113213490000</u>		Lease Name: <u>Hoffman</u>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape <input type="checkbox"/> Dike		Well Number: <u>125</u> Source Location (QQQQ): <u>SW</u> - <u>SE</u> - <u>SW</u> - <u>SE</u> Sec. <u>25</u> Twp. <u>17S</u> R. <u>4W</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>200</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1965</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section GPS Location: Lat: <u>38.536731</u> , Long: <u>-97.710428</u> <small>(e.g. xx.xxxxx)</small> <small>(e.g. -xxx.xxxxx)</small> Datum: <input type="checkbox"/> NAD27 <input checked="" type="checkbox"/> NAD83 <input type="checkbox"/> WGS84 County: <u>McPherson</u>	
No Waste to be Hauled: <input checked="" 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 type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: _____ No. of loads _____ Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input 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.) Date of Waste Transfer: _____ Operator Name: <u>Husky Ventures, Inc.</u> License No.: <u>34489</u> Lease Name: <u>Hoffman</u> Sec. <u>25</u> Twp. <u>17N</u> R. <u>4W</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West Docket No./API No.: <u>14-CONS-795-CPEN</u> County: <u>McPherson</u> Comments: <u>There wasn't any waste to haul.</u>			
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. Date: <u>5/15/14</u> Signature: <u></u> Title: <u>President</u>			