



CLOSURE OF SURFACE PIT

Operator Name:	License Number:
Operator Address:	
Contact Person:	Phone Number: () -
Permit Number <i>(API No. if applicable)</i> :	Lease Name & Well No.:
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit	Pit Location (QQQQ): _____ - _____ - _____ - _____ Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West _____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section _____ Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section _____ County
Date of closure: _____	
Was an artificial liner used? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If no, how were the sides and bottom sealed to prevent downward migration of the pit contents?	
Abandonment procedure of pit:	

Submitted Electronically

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form GDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Omni-ly</u>		License Number: <u>34192</u>
Operator Address: <u>123 Robert S. Kerr Av. OKC, OK 73102</u>		
Contact Person: <u>Karen Sharp</u>		Phone Number: <u>(405) 429-5745</u>
Permit Number (API No. if applicable): <u>OKC 15-033-21588-00-00</u>		Lease Name: <u>DIXIE</u>
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Dike <input checked="" type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Well Number: <u>1-25 H SW</u> Source Location (QQQQ): <u>SW-SW-SW-SW</u> Sec. <u>25</u> Twp. <u>31S</u> R. <u>20W</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>303</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>150</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Comanche</u> County

Type of waste to be disposed: Fluid Soil Mud / Cuttings Other: _____

Amount of waste: _____ No. of loads: 1800 Barrels _____ Tons _____ YDS

Destination of waste: Reserve Pit Haul Off Pit Disposal Well Lease Road Dike / Berm Other: _____

If waste is transferred to another reserve pit, is the lease active? Yes No Not be transferred

Location of waste disposal: _____ Date of Waste Transfer: _____

Operator Name: Richard Gray Mud Disposal License No.: 323004 (OCC Order #)

Lease Name: Drilling Mud Disposal Sec. 15 Twp. 24 R. 7 East West

Docket No./API No.: order # 355765 take flow back County: Parfield

Comments:

The undersigned hereby certifies that he / she is (President) Richard Gray
 for Gray Mud Disposal (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 18th day of October

Richard Gray
Agent Signature

Martha F. Harvey
Notary Public

My Commission Expires: 3-12-2013

