

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name:						License Number:							
Operator Address:													
Contact Person:							Phone Number: () -						
Permit Number (<i>API No. if applicable</i>):							Lease Name:						
Source of Waste: ☐ Emergency Pit ☐ Workover Pit ☐ Burn Pit ☐ Steel Pit ☐ Dike ☐ Settling Pit ☐ Drilling Pit ☐ Haul-off Pit ☐ Spill / Escape							Well Number:						
							Source Location (QQQQ): - - - -						
							Sec. Twp. R. ☐ East ☐ West Feet from ☐ North / ☐ South Line of Section Feet from ☐ East / ☐ West Line of Section County						
Type of waste to be disposed: ☐ Fluid ☐ Soil ☐ Mud / Cuttings ☐ Other: _____													
Amount of waste: No. of loads 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													
Location of waste disposal:							Date of Waste Transfer: _____						
Operator Name: _____							License No.: _____						
Lease Name: _____							Sec. Twp. R. ☐ East ☐ West						
Docket No./API No.: _____							County: _____						
Comments: 													
Submitted Electronically													