

Kansas Corporation Commission Oil & Gas Conservation Division

132488

Form CDP-5 May 2011 Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name:	License Number:			
Operator Address:				
Contact Person:	Phone Number: () -			
Permit Number (API No. if applicable):	Lease Name:			
Source of Waste:	Well Number:			
Emergency Pit Settling Pit Workover Pit Drilling Pit Burn Pit Haul-off Pit Steel Pit Spill / Escape Dike	Source Location (QQQQ):			
No Waste to be Hauled: (If checked, provide an explanation as to why no waste was hauled in the Comments area.)				
Type of waste to be disposed:				
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: Destination Out of State: (If checked, provide the location of where the waste was hauled in the Comments area.) Date of Waste Transfer:				
Operator Name:	License No.:			
Lease Name:	Sec Twp R East West			
Docket No./API No.:				
Comments:				
Submitted Electronically				
Submitted Liectronically				

Paul Oilfield Service, Inc.

P.O. Box 1773 Great Bend, KS 67530

Invoice

DATE	INVOICE #
2/15/2013	71798

FG Holl, LLC P.O. Box 308 Ellinwood, KS 67526

		TERMS
		Due on receipt
RATE	QUANTITY	AMOUNT
b Poit tothes Dispos	e sal wells	

Thank you for your business.