

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 ☐ Settling Pit ☐ Workover Pit ☐ Drilling Pit ☐ Burn Pit ☐ Haul-off Pit ☐ Steel Pit ☐ Spill / Escape ☐ Dike	Well Number: Source Location (QQQQ): _____ - _____ - _____ - _____ Sec. _____ Twp. _____ R. _____ ☐ East ☐ West _____ Feet from ☐ North / ☐ South Line of Section _____ Feet from ☐ East / ☐ West Line of Section GPS Location: Lat: _____, Long: _____ (e.g. xx.xxxxxx) (e.g. -xxx.xxxxxx) Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84 County: _____
No Waste to be Hauled: ☐ <i>(If checked, provide an explanation as to why no waste was hauled in the Comments area.)</i>	
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: Destination Out of State: ☐ <i>(If checked, provide the location of where the waste was hauled in the Comments area.)</i>	
Operator Name: _____ Lease Name: _____ Docket No./API No.: _____ Comments: Date of Waste Transfer: _____ License No.: _____ Sec. _____ Twp. _____ R. _____ ☐ East ☐ West County: _____	

Submitted Electronically