

Kansas Corporation Commission Oil & Gas Conservation Division

178471

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	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?				
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:				
Lease Name:				
Docket No./API No.: County:				
Comments:				
Submitted Electronically				

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A/C:	EN	NTITY: 7	43003
VIP# 1418	O C BY	rum R	BY
DESC:			

