



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1182485

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: <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Emergency Pit</div><div><input type="checkbox"/> Settling Pit</div></div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Workover Pit</div><div><input type="checkbox"/> Drilling Pit</div></div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Burn Pit</div><div><input type="checkbox"/> Haul-off Pit</div></div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Steel Pit</div><div><input type="checkbox"/> Spill / Escape</div></div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Dike</div><div></div></div>			